

REPORT
of the
HOUSE INTERIM COMMITTEE
on
DOMESTIC VIOLENCE

December 15, 1999

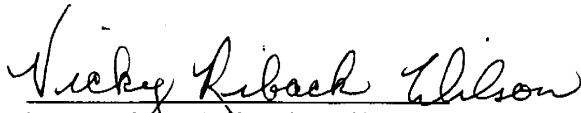
HOUSE INTERIM COMMITTEE ON DOMESTIC VIOLENCE

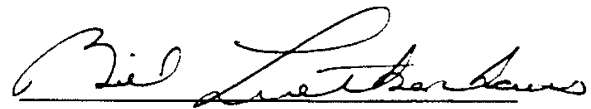
December 15, 1999

The Honorable Steve Gaw, Speaker
Missouri House of Representatives
State Capitol, Room 308
Jefferson City, Missouri 65101

Dear Mr. Speaker:

The undersigned members of the House Interim Committee on Domestic Violence have completed their charge under House Resolution No. 502 and respectfully submit this report.

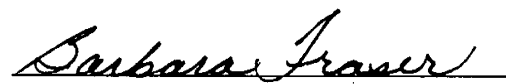

Rep. Vicky Riback Wilson
Co-Chair


Rep. Bill Luetkenhaus
Co-Chair

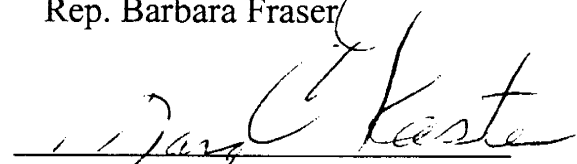

Rep. Patrick Dougherty

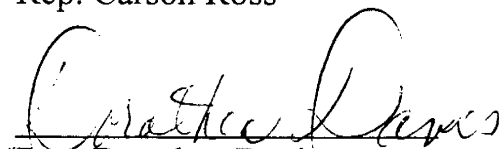

Rep. Emmy McClelland


Rep. Cindy Ostmann


Rep. Barbara Fraser


Rep. Carson Ross


Rep. Mary Kasten


Rep. Dorathea Davis

House Resolution No. 502

(As amended, House Journal, p.1566)

Whereas, domestic violence has a broad impact on the women, men and children of our society because it can occur at anytime and anywhere, regardless of age, economic status, or cultural background; and

Whereas, domestic violence is a pattern of coercive behavior that may include physical, sexual, economic, emotional and psychological abuse which has the goal of establishing and maintaining power and control; and

Whereas, although public awareness about domestic violence has increased dramatically over the past decade, it continues to be underreported and misunderstood; and

Whereas, each month nearly ten thousand victims of domestic violence, their families and friends across the United States receive crisis intervention, referrals, information and support:

Now, therefore, be it resolved by the members of the Missouri House of Representatives, Ninetieth General Assembly, First Regular Session, that an interim committee of the General Assembly be created to be composed of nine members of the House, to be appointed by the Speaker of the House, and that said committee be authorized to function during the interim between the Ninetieth and the Ninety-first General Assemblies; and

Be it further resolved that said committee make a comprehensive study on domestic violence, including the solicitation of domestic violence information from various groups and the public, the gathering of statistical evidence on domestic violence, a list of sectors of our society that are affected by domestic violence, and the social, economic, legal, educational and health implications of domestic violence; and

Be it further resolved that said committee shall have the authority to appoint a subcommittee comprised of Missouri residents with experience and expertise in areas related to domestic violence to assist said committee in its duties; and

Be it further resolved that the Committee on Legislative Research, and House Research provide such legal, research, clerical, technical, and bill drafting services as the committee may require in the performance of its duties; and

Be it further resolved that the actual and necessary expenses of the committee, its members, and any staff personnel assigned to the committee incurred in attending meetings of the committee or any subcommittee thereof, be paid from the House Contingent Fund.

MEMBERS

Rep. Vicky Riback Wilson (Co-Chair)

Rep. Bill Luetkenhaus (Co-Chair)

Rep. Patrick Dougherty

Rep. Emmy McClelland

Rep. Cindy Ostmann

Rep. Barbara Fraser

Rep. Carson Ross

Rep. Mary Kasten

Rep. Dorathea Davis

STAFF

Julie Jinkens McNitt, House Research
Sandy Lueckenhoff, Legislative Research

**DATES and LOCATIONS
OF
COMMITTEE
HEARINGS & MEETINGS**

September 13	Organizational meeting; Public hearing	Jefferson City
September 14	Working meeting	Jefferson City
October 12	Public hearing; conference	Florissant
October 26	Public hearing; working meeting	Jefferson City
November 1	Public hearing	New Madrid
November 2	Tour; public hearing	St. Louis
November 3	Public hearing	Springfield
November 4	Public hearing	Kansas City
November 10	Public hearing	Columbia
November 11	Working meeting	Columbia
December 7	Working meeting	Jefferson City

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INTRODUCTION

The issue of domestic violence, although no longer as taboo a subject of public discourse as in prior decades, is still one that makes many people uncomfortable to discuss. Often underlying this uneasiness is a belief that what occurs in the privacy of people's homes is just that, a private matter. This belief ignores and perpetuates the cycle of violence and its resultant long-term ramifications for our children, schools, families, communities, workplaces and employers, and the many service providers who come into contact with the victims, perpetrators, and child witnesses of domestic violence.

Recognizing that public awareness about domestic violence has increased over the past decade, but that this issue is still socially neglected and misunderstood, the Missouri House of Representatives adopted House Resolution No. 502, which created the House Interim Committee on Domestic Violence. It charged the Committee to make a comprehensive study on domestic violence, including the social, economic, legal, educational and health implications thereof.

Given the broad scope of domestic violence issues and in order to focus the work of the Committee and the information presented to it, the Committee developed seven assumptions in regard to domestic violence:

COMMITTEE ASSUMPTIONS

Domestic violence is a public health issue that affects all social institutions in a community and the state.

Addressing the effects of domestic violence is a shared community responsibility.

Integrated and coordinated services yield better results than fragmented approaches to domestic violence.

Public policy must be rooted in sound statistical data and research.

Domestic violence has a financial impact on businesses and individuals.

Domestic violence is an issue of power and control.

People have a right to be involved in decisions that affect them.

Additionally, the Committee appointed 6 subcommittees, with at least one member acting as a liaison: Protocol, Screenings & Coordinated Approaches (Rep. Barbara Fraser); Economic, Business & Insurance (Reps. Pat Dougherty and Carson Ross); Law Enforcement-Civil & Criminal Legal Issues (Reps. Cindy Ostmann and Doratheia Davis); Pilot Programs, Best Practices & Prevention (Rep. Emmy McClelland); Funding & Resource Development (Rep. Bill Luetkenhaus); and Social Services/TANF (Rep. Mary Kasten).

Eight public hearings were held at seven locations around the state, at which the Committee heard nearly 40 hours of testimony from over 120 witnesses; several persons submitted written testimony only. The Committee also held 5 working meetings, toured the Kathy J. Weinman Children's Advocacy Centre at the University of Missouri - St. Louis, and attended a conference in Florissant on domestic violence issues.

The following section is a summary of the proceedings and the Committee recommendations resulting therefrom. Many of the recommendations will be implemented by legislation proposed and supported by the Committee.

PROCEEDINGS & RECOMMENDATIONS

PUBLIC AWARENESS

One factor that enables the cycle of violence to continue is the lack of public awareness about the true impact of domestic violence upon all aspects of society, fostering a tolerance for that type of behavior. There is a need for general awareness by the public of domestic violence issues that will cultivate zero tolerance for that behavior. Additionally, an increase in public awareness of the dynamics of domestic violence will generate public and legislative support for increased domestic violence funding. **The Committee believes that increased public awareness and education, although initially increasing the demand for domestic violence services, eventually will decrease the level of domestic violence and therefore decrease the demand for services over time.**

FUNDING

The dramatic need for more funding was the one topic about which there was unanimous testimony across the state and across the witness profiles. Testimony indicates that the domestic violence problem is far larger than can be documented because of a lack of reliable reporting in Missouri. An increase in public awareness of domestic violence issues, however, will increase the demand for core services, thus multiplying the need for more core services funding.

Grant programs, usually competitive for federal funds through the Department of Public Safety and Department of Social Services, are an indispensable proportion of funding for most domestic violence service providers. Additional funds come from public and private local sources. Facilities serving multi-county areas often have trouble securing funds from counties other than the one in which they are physically located. There is also disparity in funds available in rural and urban areas, although costs are not necessarily significantly different. For example, the Committee was told that a major donation in a rural area is \$300; in urban areas, a comparable level of giving may be in the thousands.

Furthermore, most grants are awarded for 1-year terms only; the resultant lack of certainty, long-term stability and continuity places many burdens on the recipients. The grant preparation process consumes many valuable resources and requires expertise, not always available on a volunteer basis. This process may be inhibited by the lack of Missouri-specific statistics. The lack of flexibility in grant funding also can limit the effectiveness of its use. For example, proportionately fewer grant dollars are available for salaries, which can make it difficult for domestic violence service providers to hire and retain experienced and qualified personnel.

RECOMMENDATION: Identify and appropriate additional state and federal funds for programs and infrastructure; increase flexibility of funding to fit local needs.

DOMESTIC VIOLENCE TRAINING AND EDUCATION

All witnesses agreed upon the need for more, or required, domestic violence training and education. This includes education on the dynamics of domestic violence and sensitivity training for all persons who, in the course of their profession or avocation, encounter or address issues surrounding domestic violence victims, batterers and their children. It also includes education for children in order to break the cycle of violence. Although the relatively small number of training and education program hours currently available was discussed, the Committee commends the domestic violence training already being done by the Missouri Coalition Against Domestic Violence (MCADV) in cooperation with the Department of Social Services and others.

RECOMMENDATION: Training and education for:

- (a) judges and court personnel;**
- (b) prosecutors and their staff;**
- (c) law enforcement;**
- (d) persons representing domestic violence victims and their children;**
- (e) guardians ad litem and mediators;**
- (f) educators;**
- (g) probation and parole staff;**
- (h) health & mental health care providers (public and private); and**
- (i) others who have contact with domestic violence victims, batterers, and their children.**

RECOMMENDATION: Link funding and licensure and certification requirements for all health care, mental health and other service providers, and educators to satisfactory completion of appropriate training and education.

RECOMMENDATION: Link funding and judicial qualification standards (especially for family court judges) to satisfactory completion of appropriate training and education.

RECOMMENDATION: Expand MCADV/DSS training to all parts of the state, with the necessary funding.

Domestic Violence programs in the New Madrid, Kansas City and Springfield areas are working on developing school curricula. Curricula also exists at the national level.

RECOMMENDATION: Domestic violence prevention curricula should be made available to be incorporated into the existing violence prevention curriculum of local school districts; the Department of Elementary and Secondary Education should assist in the coordination and dissemination of culturally- and age-appropriate curricula.

Education needs to be provided directly to domestic violence batterers. It can include behavior modification, conflict resolution, and anger management. Witness recommendations included: court-mandated education for batterers; initiation of a pilot program under the Department of Corrections; and development of performance standards for batterer-education courses. Other testimony indicated that proposed standards for batterer intervention services are currently being drafted and should be circulated for review in 2000. Because there is a lack of consensus on what is effective, the Committee makes no specific recommendation on mandated batterer education at this time.

Concerns were expressed that requiring or ordering domestic violence victims to receive counseling, even if the counseling would be beneficial, could essentially revictimize the victims. This is so because many batterers tell their victims the abuse is the victims' fault because they are "crazy". Mandated counseling would reinforce or put an official seal upon this claim.

Educational materials and programs also are needed to raise public awareness and understanding of domestic violence

IDENTIFYING DOMESTIC VIOLENCE

The Crime of Domestic Violence

Witnesses all around the state testified that creation of a separate crime of domestic violence with enhanced penalties would not only simplify reporting and data collection procedures, but would send a clear message that domestic violence is a crime that will no longer be tolerated in Missouri.

RECOMMENDATION: Enact a separate crime of domestic violence with enhanced penalties.

Testimony also indicated that deaths resulting from domestic violence are not always identified as such. Expanding the charge of the multi-disciplinary fatality review boards that currently meet to examine the circumstances surrounding a death involving a child to include all suspicious deaths would provide additional information regarding the scope of the domestic violence problem in Missouri, as well as an opportunity to learn what could have been done to prevent such deaths. This also would put Missouri in line with the growing national trend. In fact, one witness testified that prior to the original enactment of the enabling legislation for the fatality review boards, it was proposed that such fatality review boards investigate all suspicious deaths.

RECOMMENDATION: The responsibilities of the multi-disciplinary fatality review boards should be expanded to include all suspicious deaths.

Data Collection & Reporting

House Resolution No. 502 charged the Committee with gathering statistical evidence on domestic violence, a daunting task made all the more daunting in Missouri due to the lack of any uniform, statewide mandatory reporting procedure for crimes, compounded by a statutory failure to distinguish crimes involving domestic violence from other forms of violence, and further stymied by the lack of a uniform definition of domestic violence.

Crimes with a domestic violence component often are not recognized or identified as such. Consequently, it is difficult to verify a pattern of behavior, and a complete picture of the social and economic impacts of domestic violence is not available. Without said information, it is difficult to develop effective intervention and prevention strategies.

RECOMMENDATION: RSMo. 455.543 should be expanded to require local law enforcement to determine whether any criminal case is related to domestic violence.

According to numerous witnesses, the inability to generate Missouri-specific statistics on domestic violence undermines public awareness of the true scope of the problem in this state, detrimentally impacts the availability of funding sources by impeding accurate and effective public policy decisions (i.e. legislative appropriations), and limits grant opportunities for both private organizations and state agencies. **It is estimated that at least \$1,000,000 in federal grants is lost each year because of the lack of valid statistical data in Missouri.**

Missouri is one of only two states that has not enacted mandatory Uniform Crime Reporting (UCR), and the other state, Mississippi, is now in the process of doing so. Uniform Crime Reporting is a city, county, and state law enforcement program that provides a nationwide view of crime based on the submission of statistics by law enforcement agencies throughout the country.

RECOMMENDATION: Adopt and fund mandatory Uniform Crime Reporting.

Defining Domestic Violence

Concerns were expressed regarding the different definitions of domestic violence utilized in Missouri's statutes and the problem this presents in interpreting and applying the statutes in a consistent manner. The Committee recognizes that expansion or amendment of these statutes may be necessary given the definition of domestic violence with which the Committee was working and the broad implications of domestic violence within society and how these are or are not dealt with in individual statutes. The Committee believes this issue should be analyzed further to determine whether different definitions serve distinct purposes, or whether the applicable statutes should be amended to be consistent.

CRIMINAL LAW ISSUES

Barriers to prosecution and difficulties embedded in Missouri's criminal law as it pertains to domestic violence were identified as primary issues of concern by a majority of those appearing before the Committee or otherwise providing input.

A frequent topic upon which the Committee received testimony was victimless prosecution, also referred to as a prosecutorial no-drop policy, and sometimes as the excited utterance issue. Perhaps one of the greatest obstacles to domestic violence being given the consideration that its seriousness warrants is the frustration engendered in law enforcement, prosecutors and judges triggered by domestic

violence victims who first report their batterers then later refuse to cooperate in the batterer's prosecution. Whether the batterer charms and persuades the victim to return to the relationship, or coerces and threatens the victim into refusing to cooperate, or whether the victim is economically dependent upon the batterer, a refusal by the victim to cooperate in the batterer's prosecution often results in no prosecution or an unsuccessful one, and tends to diminish the credibility of the victim in societal eyes, especially where there is a pattern of initial reporting and later non-cooperation involving the same victim and batterer. If the victim and the batterer are not married, the victim can be compelled to take the witness stand and testify, often under legal threat of contempt, which many witnesses appearing before the Committee decried as revictimization of the victim. If the victim and the batterer are married, the victim can invoke the spousal privilege under RSMo. 546.260, thereby refusing to testify.

Prosecutors were concerned by the difficulties of prosecuting without a cooperative witness. Domestic violence advocates worried about the danger to victims when they testify, as well as about psychological barriers. Law enforcement was concerned about the collection of evidence. Suggestions to the Committee ranged from elimination of the spousal privilege to expanding it to include intimate partners. Some witnesses favored an evidentiary statute that would treat a victim-spouses' invocation of the privilege as a statement in itself against which a prior inconsistent statement could be used for impeachment purposes. Still others proposed allowing admission of batterers' prior bad acts and misconduct in domestic violence prosecutions.

Others advocated the need for codification of an evidentiary rule known in legal terms as the "excited utterance" exception to the hearsay rule. This would allow the admittance in court proceedings of statements made by victims at the time of the domestic violence incident which otherwise would be disallowed as hearsay. While not assuring successful prosecution of a batterer, this alternative would alleviate problems precipitated by victim non-cooperation and would not revictimize the victim through the use of legal compulsion to testify.

RECOMMENDATION: For purposes of domestic violence cases only, enact federal rule of evidence 803 (2) - the "excited utterance" hearsay exception.

Concerns were expressed by many victim-advocate witnesses that prosecutors, in their efforts to successfully proceed with victimless prosecutions, attempt to subpoena records of domestic violence shelters that contain information provided to the shelter by the victims. Use of such information could discourage the victims from seeking the assistance of shelters initially, as well as compromising staff's ability to get information needed to assist their client.

RECOMMENDATION: Enact a confidentiality privilege covering information provided by domestic violence victims to shelter workers, as limited in RSMo. 455.200, unless the victim signs a waiver of such privilege.

The Committee heard testimony repeatedly all across the state that prosecution of batterers as well as protection of victims and families would be aided significantly by increased domestic violence training and education for judges, prosecutors and law enforcement. A better understanding of the cycle of violence and sensitivity to domestic violence issues by judges and judicial personnel would encourage continued victim participation. Increased training and education for prosecutors, their staff, and law enforcement on appropriate and effective methods for investigating, documenting and collecting evidence in domestic violence cases greatly enhances the likelihood of successful prosecution of batterers, with or without victim participation.

The Committee learned that the most dangerous time for a victim is often immediately following the arrest (and release) of the perpetrator. Low bond rates, leading to quick in-and-out times, often do not allow victims and families sufficient time to get orders of protection or seek safety. They also ignore the need for a "cool down" period in many cases. It further suggests that the crime is not one to be taken seriously and that the behavior has no serious consequences, thus perpetuating an enabling climate of opinion.

RECOMMENDATION: Enact a mandatory 8-hour minimum holding period and expand the maximum holding period under RSMo. 544.170 from 20 hours to 36 hours when a domestic violence offense is the primary cause for arrest.

RECOMMENDATION: Require more advanced domestic violence training and education for judges and court staff, prosecutors and their staff, and law enforcement personnel.

Other criminal law issues brought to the attention of the Committee include the need for: revising and updating the stalking and harassment laws to incorporate the use of newer technologies by offenders (i.e. e-mail, pagers, etc.); increased actual jail time for batterers, no matter how short in duration, to demonstrate the seriousness of the offense; and the ability to introduce evidence of prior domestic violence incidents in court proceedings.

RECOMMENDATION: Amend the stalking and harassment laws to reflect new technologies utilized by perpetrators.

CIVIL LEGAL ISSUES

Although Missouri's Adult Abuse Act provides valuable potential relief to domestic violence victims, the Committee heard testimony from numerous witnesses on ways in which the implementation of these laws could be improved to increase their

ability to provide meaningful relief and safety to victims.

One statement heard over and over by the Committee was that the effectiveness of orders of protection depends almost entirely upon the discretion of the judges who issue them and thus control their content, upon their proper enforcement by law enforcement, and upon knowledgeable and appropriate counseling and advice by persons representing domestic violence victims. In each instance, domestic violence training and education plays a crucial role. Only when judges, law enforcement personnel, and persons representing domestic violence victims truly understand the dynamics of domestic violence and thoroughly understand the intent and provisions of the law will they be willing and able to fully and effectively exercise their discretionary powers and mandatory responsibilities thereunder. Two frequent examples cited to the Committee were judges' unwillingness to make child custody determinations in orders of protection despite having the authority to do so, and judges' failure to prohibit firearms possession by batterers as required by federal law or conversely, allowing batterers to retrieve firearms from the home. In at least one jurisdiction, a judge would not even allow a petition for a protection order to be filled out unless the judge planned to issue the order.

RECOMMENDATION: Require and provide more advanced domestic violence training and education for judges, law enforcement personnel, and persons representing domestic violence victims.

A specific related concern brought to the attention of the Committee is the increasing use of consent orders of protection, in which no hearing is held, no record is usually made, and no findings of abuse are entered of record. While there may be some situations in which consent orders are warranted, their increasing use suggests a preference for judicial fast-tracking that fails to consider the long-term detrimental impact on victims' overall safety and well-being and the nullification of a potentially valuable tool in later criminal prosecutions.

Including in consent orders of protection a finding that abuse has occurred would not only allow prosecutors to utilize those orders in proving elements of a later

criminal prosecution, but also would trigger certain safety mechanisms built into the child custody statute and intended to protect both custodial parent victims and children.

Additionally, the federal Violence Against Women Act (VAWA) prohibits the possession or purchase of firearms by batterers against whom an order of protection has been issued, but only if the order includes a finding that the batterer represents a credible threat to the physical safety of the victim or includes an explicit prohibition against the use, attempted use, or threatened use of physical force against the victim that would reasonably be expected to cause bodily injury. Most order-of-protection forms in use today do not contain these firearms provisions for consent orders of protection. Including these provisions would allow the requirements of VAWA to be met and enforced, which would better protect domestic violence victims.

RECOMMENDATION: Require the use of uniform order-of-protection forms that include a check-off box for a court finding of abuse in consent cases and check-off boxes containing the required Violence Against Women Act language.

RECOMMENDATION: Enact state statutes mirroring the federal law prohibiting the possession or purchase of firearms by domestic violence offenders.

Other civil law issues brought to the attention of the Committee include: explicit authority for judges to order batterers to pay for the medical expenses of their victims; orders of protection for persons under the age of 18, especially given what appears to be an increase in abusive dating relationships; funding (approx. \$2500/year) and authority to provide “on-call” pay to clerks in the St. Louis City Circuit Clerk’s office who are required by law to be on call 24 hours a day to assist

victims in obtaining orders of protection; and authority for judges to order victims to receive counseling.

RECOMMENDATION: Include the medical expenses of domestic violence victims in the list of expenses a court can order a domestic violence offender to pay.

Finally, several witnesses testified about the abuse of the ex parte process, either for vindictive game-playing or as a legal strategy in a dissolution. They asked the Committee to look into ways of reducing misuse of the statutes.

IMPACT ON CHILDREN: BREAKING THE CYCLE OF VIOLENCE

Domestic violence can have a variety of detrimental effects on children: emotional; cognitive; behavioral; social; and physical. As early as infancy, there is a recognizable impact on children from being in a domestic violence environment, even if they are not physically touched or physically present during an incident.

Young boys who witness domestic violence are more likely to become batterers. Often these behavior tendencies are evident at very early ages. Children of victims are more likely to be abused by the domestic violence perpetrators. Violence in schools and in society has been linked to experiences with family violence, even when children are not physically abused. Studies indicate that a large percentage of persons in prison have some form of domestic violence experience in their background. Thus, educational and awareness programs for children, starting as early as preschool, as well as early parenting programs, are crucial to breaking the cycle of violence and keeping children safe.

RECOMMENDATION: Domestic violence prevention curricula should be made available to be incorporated into the existing violence prevention curriculum of local school districts; the Department of Elementary and Secondary Education should assist in the coordination and dissemination of culturally- and age-appropriate curricula.

Several witnesses testified that domestic violence is the leading, preventable cause of mental illness for children growing up in homes where domestic violence is present. Many children who witness domestic violence are diagnosed with Attention Deficit/Hyperactivity Disorder (AD/HD) and medicated, but current research indicates that many of these children really are suffering from Post-Traumatic Stress Syndrome. This misdiagnosis interferes with their ability to receive appropriate education and treatment.

Concern for the safety and well-being of children also prompted repeated testimony that interpretations of the relocation, custody and visitation statutes are putting domestic violence victims and their children at risk. Few, if any, moves to domestic violence shelters are planned 60 days in advance. Fear of the consequences of violating the relocation statute can prevent victims from leaving abusive relationships, keeping both the victims and their children at risk. The custody and visitation statutes do not adequately consider domestic violence in the determinations unless there is direct evidence that children are being abused. Testimony indicated a need to establish and fund more safe houses like the Heritage House in St. Louis. Heritage House has developed a comprehensive environment for safe custody and visitation exchanges of children, supervised visitation, and counseling of children in families with domestic violence.

RECOMMENDATION: Examine and amend relocation, child custody and visitation statutes.

BUSINESS, INSURANCE, AND OTHER ECONOMIC ISSUES

According to one witness representing business interests, domestic violence is the number one cause of workplace violence, and can tremendously impact employee morale and productivity. Because appearance at work is predictable, violence after separation often occurs at the workplace, endangering coworkers as well as the victim.

The Committee heard testimony that in order to transition from being domestic violence victims to domestic violence survivors there need to be safety nets in place for the continued well-being of survivors and their children so that they may live without fear. A minimum level of economic security is one type of safety net, and can be tied to the victim's home, car and job. This economic security can be severely impaired or destroyed in situations where a batterer causes damage to the home, automobile, or other property co-owned with the victim and the insurer then denies the claim of the innocent coinsured victim.

RECOMMENDATION: Amend insurance laws to allow an innocent coinsured victim to collect on a policy if the innocent coinsured formally expresses a willingness to cooperate in the prosecution of the coinsured offender.

Domestic violence victims and the Department of Insurance testified that some insurance companies have canceled policies or raised premiums. Despite the enactment of the domestic violence insurance nondiscrimination law, witnesses stated that the "sole reason" provision of the law is insufficient.

RECOMMENDATION: Amend domestic violence insurance non-discrimination law to define "sole reason" to include the acts that make a pattern of domestic violence.

As stated in Committee Assumption #6, domestic violence is an issue of power and control. Often batterers seek to maintain their power and control over their victims by so continually harassing them on the job that the victims lose the job. Or the injuries the victims receive may cause them to miss so much work that they lose the job. Victims may be unwilling to quit a job and move away from an abusive relationship if they have no income to sustain themselves and their children until they find new jobs. A growing number of states deem domestic violence-related separations from employment as "good cause" thereby allowing the victim to collect unemployment benefits. The federal government also has considered this issue.

RECOMMENDATION: Further analyze the issue of deeming domestic violence-related separations from employment as "good cause" when making unemployment benefits determinations for possible future consideration by the legislature.

ORGANIZING COMMUNITY RESPONSE & SERVICES

Because domestic violence is a public health issue that affects all social institutions in a community and the state (Committee Assumption #1), and because addressing these effects is a shared community responsibility (Committee Assumption #2), it is important to coordinate and integrate efforts at both the community and state levels.

At the community level, this involves expansion of the coordinated community responses already in place in urban communities such as Hazelwood and in the rural counties such as Dunklin, Mississippi, and New Madrid. Coordination often comes from members of the Missouri Coalition Against Domestic Violence. In other communities, particular groups have taken the initiative to bring together stakeholders, including health care and social service providers, law enforcement, children's advocates, and others. Increasing state funds to direct service providers

will allow more service providers to initiate coordinated community response teams.

In keeping with Committee Assumption #3, communities already initiating coordinated community response report greater success in prosecuting domestic violence cases, in developing community support for domestic violence survivors, and developing infrastructure to deal with issues relating to domestic violence. Other benefits include an increased trust and cooperative relationship between law enforcement and other community stakeholders.

Community- and state-based not-for-profit groups often provide the impetus and support for coordinated community response. The Committee strongly urges that these efforts be replicated, recognizing those factors that have been successful in other communities. **The Committee supports and encourages coordinated community response in all communities across the state through community partnerships, community betterment groups, and other state-related entities, and private not-for-profit organizations.**

The efforts at the state level also are fragmented, with nine state departments reporting to the Committee on how they are involved in or affected by domestic violence issues. In order to coordinate and integrate state efforts, groups such as the Family Investment Trust can be utilized. In order to be effective, however, this would necessitate expanding the Family Investment Trust to include the Department of Public Safety, particularly in light of the fact that both law enforcement functions and funding for shelters currently flow through this department.

HEALTH & MENTAL HEALTH: PROTOCOLS & SCREENING

Testimony suggested that appropriate protocol and screening tools are available, but are not being used by the necessary individuals or are being used by individuals without expertise. It is not enough just to ask the questions; it must be done with sensitivity, appropriate training, and the ability to make referrals to local service providers. There is great need for coordination of available screening tools, or better yet, development of a single, universal screening tool. For example, the MCADV/DSS training program could be expanded and used as a model for other

state agencies such as the Department of Health and the Department of Mental Health. Then all these state agencies would be following the same protocol: screen and refer to local services. The Committee encourages the Department of Health and the Department of Mental Health to use the MCADV/DSS training program as a model, and to work with both public and private agencies to coordinate and standardize screening with appropriate training provided to personnel.

RECOMMENDATION: Link funding and licensure and certification requirements for all health, mental health and other service providers, and educators to satisfactory completion of appropriate training and education.

Consistent screening for domestic violence, followed up with referrals to local services, will raise awareness of and substantially increase demand for those services. In order to provide the appropriate responsive services, there is a dramatic need to increase the available funding.

Often, the only professionals that domestic violence victims encounter with any regularity are their health care providers. This has led to suggestions that if those health care providers, through screening or otherwise, suspect that domestic violence has occurred, they should be required to report it to law enforcement. Opponents of this view argue that mandated domestic violence reporting will endanger victims and cause them to quit seeking the services of their health care providers, neither of which outcome is acceptable. This led to another problematic area of concern: the application of elder abuse laws to independent older adults living in abusive situations.

RECOMMENDATION: No mandated reporting of suspected domestic violence by health, mental health, or other care providers.

Finally, mental health programs, including drug and alcohol treatment programs, should be geared toward the unique needs and issues of those involved in some aspect of domestic violence.

CONCLUSION

The Committee, through its recommendations, was primarily concerned with assuring that people are safe (public policy should not cost a life), that batterers are identified and prosecuted, that society break the generational cycle of violence, and that funds and training are provided to make these goals possible.

APPENDICES

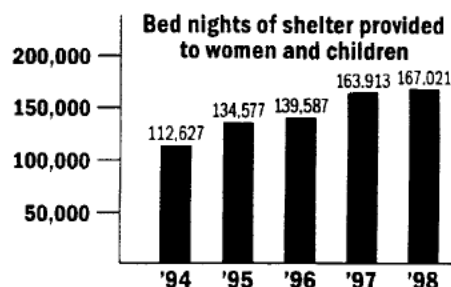
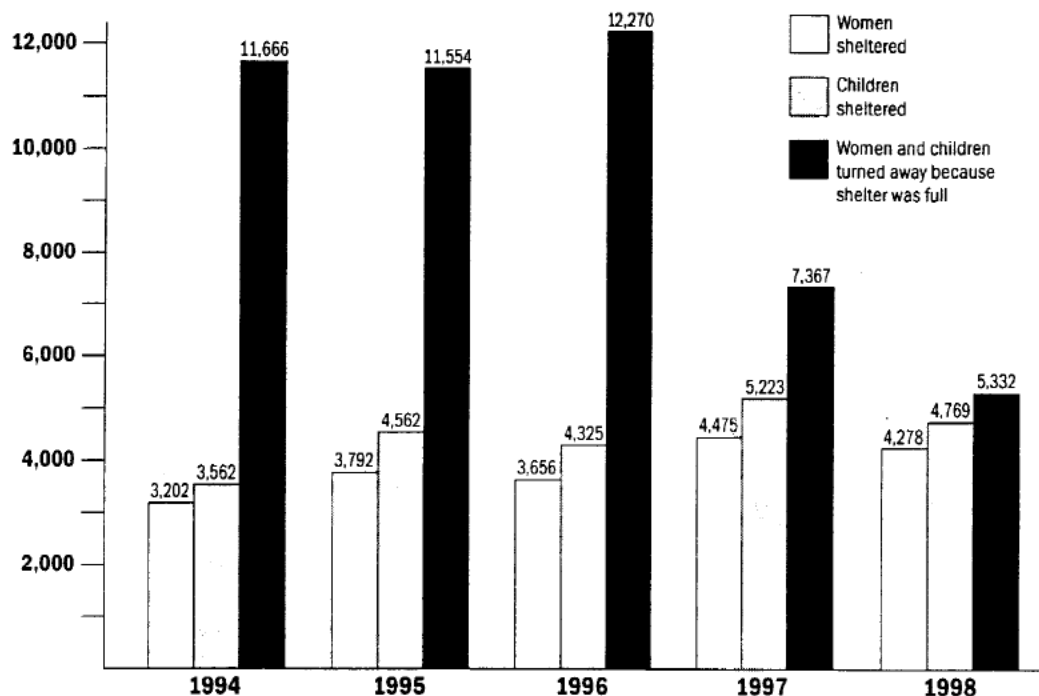
STATISTICS

1998 services statistics

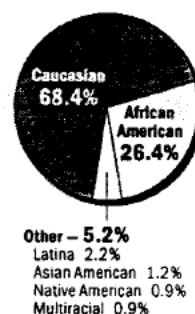
against
domestic
violence

Women and children sheltered by MCADV member programs

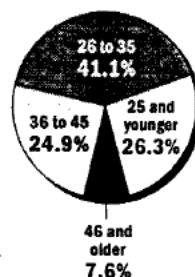
About 4 percent fewer women and 9 percent fewer children were sheltered in 1998 as compared with 1997, according to statistics voluntarily submitted by 49 MCADV member programs that provide emergency shelter services to victims of domestic violence. The 28 percent decline in the number of women and children turned away from full shelters can in part be attributed to an increase in bed space and longer stays, as well as more effective responses from law enforcement that allow more abused women to remain in their homes. The significantly large number of women and children turned away between 1994 and 1996 can in part be attributed to the effects of flooding statewide in 1993 and 1995, according to MCADV research.



Ethnicity of women sheltered in 1998



Ages of women sheltered in 1998

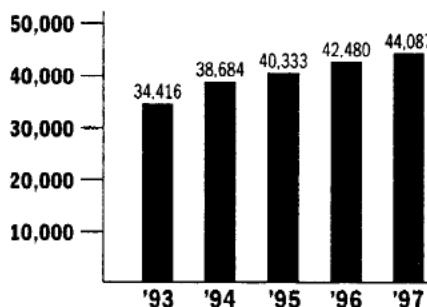


Incidents of domestic violence reported by law enforcement agencies in Missouri

The Missouri State Highway Patrol annually compiles¹ incidents of domestic violence, whether an arrest is made or not, from statistics voluntarily submitted by law enforcement agencies in the state. Nationally, the U.S. Department of Justice estimates that about half of the incidents of intimate partner violence experienced by women are reported to the police.²

¹Missouri Crime Summary, Missouri Department of Public Safety, 1993-1997.

²Violence by Intimates: Analysis of Data on Crimes by Current or Former Spouses, Boyfriends, and Girlfriends, U.S. Department of Justice, Bureau of Justice Statistics, 1998.



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Summary of services provided by MCADV member programs in 1998

The following figures are compiled from statistics voluntarily submitted by 49 MCADV member programs that provide emergency shelter services and 14 non-residential, non-governmental member programs.

MCADV member programs answered 63,005 **hotline/crisis intervention calls** in 1998.

Almost 100,000 **people attended** more than 3,275 **community education presentations** provided by MCADV member programs in 1998.

MCADV member programs offered 1,829 **support groups for children** in 1998, which were attended by 9,881 children.⁴

Volunteers donated 200,522 **hours of service** to MCADV member programs in 1998.

MCADV member programs assisted 10,077 adults seeking *Ex Parte* or Full **Orders of Protection** in 1998.³

MCADV member programs offered 4,208 **support groups for battered women** in 1998, which were attended by 21,577 women.⁴

MCADV member programs provided 19,704 hours of **licensed professional counseling** to women and children in 1998.

³ This figure contains duplication in the number of people served because some individuals receive several types of court advocacy services.

⁴ This figure contains duplication in the number of people served because some individuals attended more than one support group.

MCADV regional snapshot of 1998 shelter services



CENTRAL

Women sheltered: 700
Children sheltered: 717
 Total **bed nights** provided: 24,082
 Average **bed nights** for women: 17.3 nights
 People **turned away** because shelter was full: 172



KANSAS CITY METRO

Women sheltered: 1,087
Children sheltered: 1,109
 Total **bed nights** provided: 41,191
 Average **bed nights** for women: 17.2 nights
 People **turned away** because shelter was full: 3,283



NORTHEAST

Women sheltered: 81
Children sheltered: 80
 Total **bed nights** provided: 1,910
 Average **bed nights** for women: 13.7 nights
 People **turned away** because shelter was full: 0



NORTHWEST

Women sheltered: 453
Children sheltered: 498
 Total **bed nights** provided: 15,102
 Average **bed nights** for women: 15.0 nights
 People **turned away** because shelter was full: 87



ST. LOUIS METRO

Women sheltered: 781
Children sheltered: 1,101
 Total **bed nights** provided: 36,818
 Average **bed nights** for women: 18.7 nights
 People **turned away** because shelter was full: 1,363



SOUTHEAST

Women sheltered: 353
Children sheltered: 412
 Total **bed nights** provided: 14,745
 Average **bed nights** for women: 18.0 nights
 People **turned away** because shelter was full: 35



SOUTHWEST

Women sheltered: 823
Children sheltered: 852
 Total **bed nights** provided: 33,173
 Average **bed nights** for women: 19.7 nights
 People **turned away** because shelter was full: 392

Statistics

PREVALENCE

Domestic violence crosses ethnic, racial, age, national origin, sexual orientation, religious and socioeconomic lines.

- by the most conservative estimate, each year 1 million women suffer nonfatal violence by an intimate.
Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 3.
- by other estimates, 4 million American women experience a serious assault by an intimate partner during an average 12-month period.
American Psychl. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 10.
- nearly 1 in 3 adult women experience at least one physical assault by a partner during adulthood.
American Psychl. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 10.
- 28% of all annual violence against women is perpetrated by intimates.
Bureau of Justice Statistics Special Report: National Crime Victimization Survey, Violence Against Women (NCJ-145325), January 1994.
- 5% of all annual violence against men is perpetrated by intimates.
Bureau of Justice Statistics Special Report: National Crime Victimization Survey, Violence Against Women (NCJ-145325), January 1994.
- during 1994, 21% of all violent victimizations against women were committed by an intimate, but only 4% of violent victimizations against men were committed by an intimate.
Bureau of Justice Statistics Special Report: Sex Differences in Violent Victimization, 1994 (NCJ-164508), September, 1997, pp. 1-3.
- in 1993, approximately 575,000 men were arrested for committing violence against women. approximately 49,000 women were arrested for committing violence against men.
American Psychl. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 10.

RACE

Race is not indicative of who is at risk of domestic violence.

- domestic violence is statistically consistent across racial and ethnic boundaries.
Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 3.

AGE

Batterers and victims may experience domestic violence at any age.

- women ages 19-29 reported more violence by intimates than any other age group.
Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 4.

- women aged 46 or older are least likely to be battered by an intimate.
Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 4.
- in a 1990 restraining order study, the age of abusers ranged from 17 - 70. two-thirds of the abusers were between the ages 24 and 40.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? (1996), p.195.

GENDER

An overwhelming majority of domestic violence victims in heterosexual relationships are women.

- 90 - 95% of domestic violence victims are women.
Bureau of Justice Statistics Selected Findings: Violence Between Intimates (NCJ-149259), November 1994.
- as many as 95% of domestic violence perpetrators are male.
A Report of the Violence against Women Research Strategic Planning Workshop sponsored by the National Institute of Justice in cooperation with the U.S. Department of Health and Human Services, 1995.
- much of female violence is committed in self-defense, and inflicts less injury than male violence.
Chalk & King, eds., Violence in Families: Assessing Prevention & Treatment Programs, National Resource Council and Institute of Medicine, p. 42 (1998).
- during 1992-1993, women were 6 times more likely to experience violence by an intimate partner than men.
Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 1.
- the chance of being victimized by an intimate is 10 times greater for a woman than a man.
Bureau of Justice Statistics Special Report: National Crime Victimization Survey, Violence Against Women, 1994.
- 70% of intimate homicide victims are female.
Bureau of Justice Statistics Selected Findings: Violence Between Intimates (NCJ-149259), November 1994.
- male perpetrators are 4 times more likely to use lethal violence than females.
Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p.44, table 7.

SAME-SEX BATTERING

Domestic violence occurs within same-sex relationships with the same statistical frequency as in heterosexual relationships.

- the prevalence of domestic violence among Gay and Lesbian couples is approximately 25 - 33%.
Barnes, It's Just a Quarrel', American Bar Association Journal, February 1998, p. 25.
- battering among Lesbians crosses age, race, class, lifestyle and socio-economic lines.
Lobel, ed., Naming the Violence: Speaking Out About Lesbian Battering, 183 (1986).
- each year, between 50,000 and 100,000 Lesbian women and as many as 500,000 Gay men are battered.
Murphy, Queer Justice: Equal Protection for Victims of Same-Sex Domestic Violence, 30 Val. U. L. Rev. 335 (1995).
- while same-sex battering mirrors heterosexual battering both in type and prevalence, its victims receive fewer protections.

- seven states define domestic violence in a way that excludes same-sex victims; 21 states have sodomy laws that may require same-sex victims to confess to a crime in order to prove they are in a domestic relationship.
Barnes, It's Just a Quarrel', American Bar Association Journal, February 1998, p. 24
- many battered Gays or Lesbians fight back to defend themselves - it is a myth that same-sex battering is mutual.
Murphy, Queer Justice: Equal Protection for Victims of Same-Sex Domestic Violence, 30 Val. U. L. Rev. 335 (1995).
- by 1994, there were over 1,500 shelters and safe houses for battered women. many of these shelters routinely deny their services to victims of same-sex battering.
Murphy, Queer Justice: Equal Protection for Victims of Same-Sex Domestic Violence, 30 Val. U. L. Rev. 335 (1995).
- same-sex batterers use forms of abuse similar to those of heterosexual batterers. they have an additional weapon in the threat of "outing" their partner to family, friends, employers or community.
Lundy, Abuse That Dare Not Speak Its Name: Assisting Victims of Lesbian and Gay Domestic Violence in Massachusetts, 28 New Eng. L. Rev. 273 (Winter 1993).

BATTERED IMMIGRANT WOMEN

Battered immigrant women face unique legal, social and economic problems.

- domestic violence is thought to be more prevalent among immigrant women than among U.S. citizens.
Anderson, A License to Abuse: The Impact of Conditional Status on Female Immigrants, 102 Yale L. J. 1401 (April 1993).
- immigrant women may suffer higher rates of battering than U.S. citizens because they come from cultures which accept domestic violence, or because they have less access to legal and social services than U.S. citizens. in addition, immigrant batterers and victims may believe that the penalties and protections of the U.S. legal system do not apply to them.
Orloff et al., With No Place to Turn: Improving Advocacy for Battered Immigrant Women, Family Law Quarterly, vol. 29, no. 2, 313 (Summer 1995).
- a battered woman who is not a legal resident, or whose immigration status depends on her partner, is isolated by cultural dynamics which may prevent her from leaving her husband or seeking assistance from the legal system. these factors contribute to the higher incidence of abuse among immigrant women.
Orloff et al., With No Place to Turn: Improving Advocacy for Battered Immigrant Women, Family Law Quarterly, vol. 29, no. 2, 313 (Summer 1995).
- some obstacles faced by battered immigrant women include: a distrust of the legal system arising from their experiences with the system in their native countries; cultural and language barriers; and fear of deportation.
Orloff et al., With No Place to Turn: Improving Advocacy for Battered Immigrant Women, Family Law Quarterly, vol. 29, no. 2, 313 (Summer 1995).
- a battered immigrant woman may not understand that she can personally tell her story in court, or that a judge will believe her. based on her experience in her native country, she may believe that only those who are wealthy or have ties to the government will prevail in court. batterers often manipulate these beliefs by convincing the victim he will prevail in court because he is a male, a citizen or that he has more money.
Orloff et al., With No Place to Turn: Improving Advocacy for Battered Immigrant Women, Family Law Quarterly, vol. 29, no. 2, 313 (Summer 1995).

- although a victim may be in the country legally by virtue of her marriage to the batterer, their status may be conditional; in this situation it is common for a batterer to exert his control over his wife's immigration status in order to force her to remain in the relationship.

Jang, Caught in a Web: Immigrant Women and Domestic Violence, National Clearinghouse (Special Issue 1994), p. 400

- undocumented women may be reported to Immigration and Naturalization Services by law enforcement or social services personnel from whom they may seek assistance.

Jang, Caught in a Web: Immigrant Women and Domestic Violence, National Clearinghouse (Special Issue 1994), p. 397-399.

- a battered immigrant woman is often trapped in an abusive relationship by economics. she may have legal or practical impediments to obtaining employment or public assistance.

Jang, Caught in a Web: Immigrant Women and Domestic Violence, National Clearinghouse (Special Issue 1994), p. 403.

- battered immigrant women who attempt to flee may have no access to bilingual shelters, financial assistance or food. it is unlikely that she will have the assistance of a certified interpreter in court, when reporting complaints to police or a 911 operator, or even in acquiring information about her rights and the legal system.

Orloff et al., With No Place to Turn: Improving Advocacy for Battered Immigrant Women, Family Law Quarterly, vol. 29, no. 2, 313 (Summer 1995).

WELFARE RECIPIENTS

Domestic violence may affect a woman's ability to financially support herself and her children.

- past and current victims of domestic violence are over-represented in the welfare population. the majority of welfare recipients have experienced domestic abuse in their adult lives, and a high percentage are currently abused.

Raphael & Tolman, Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare, p. 20 (1997).

- abused (past or current) welfare recipients experience higher levels of health or mental health problems such as a physical disability, or serious or acute depression.

Raphael & Tolman, Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare, p. 21 (1997).

- 15 - 50% of abused women report interference from their partner with education, training or work.

Raphael & Tolman, Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare, p. 22 (1997).

- welfare studies show that abused women do seek employment, but are unable to maintain it. it is possible that domestic violence presents a barrier to sustained labor market participation.

Raphael & Tolman, Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare, p. 22 (1997).

- examples of abusers' sabotage of their victims' attempts to work include: calling her employer and ordering the victim to quit; making allegations requiring the victim to appear before the police, court or social services; threatening to kill the victim; committing suicide in front of the victim; sabotaging the victim's car; beating her up on the way to an interview; stealing her work uniforms; starting fights each day before school or work; breaking the victim's writing arm repeatedly; manipulating her schedule by

demanding visitation with the children; stalking; starting fights or threatening abuse which affects her ability to concentrate at work; or encouraging continued drug addition.

Raphael & Tolman, Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare, pp. 10-14 (1997).

- between one- and two-thirds of welfare recipients reported having suffered domestic violence at some point in their adult lives; between 15 - 32% reported current domestic victimization.

Raphael & Tolman, Trapped by Poverty, Trapped by Abuse: New Evidence Documenting the Relationship Between Domestic Violence and Welfare, p. 21 (1997).

RECIDIVISM

Battering tends to be a pattern of violence rather than a one-time occurrence.

- during the six months following an episode of domestic violence, 32% of battered women are victimized again.

Bureau of Justice Statistics: Preventing Domestic Violence Against Women, 1986.

- 47% of men who beat their wives do so at least 3 times per year.

AMA Diagnostic & Treatment Guidelines on Domestic Violence, SEC: 94-677:3M:9/94 (1994).

- short term (6-12 week) psycho-educational batterer-intervention programs helped some batterers stop immediate physical violence but were inadequate in stopping abuse over time. some batterers became more sophisticated in their psychological abuse and intimidation after attending such programs.

American Psychl. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 85.

- six months after obtaining a protection order: 8% of victims reported post-order physical abuse; 26% reported respondent came to or called their home or workplace; 65% reported no further problems.

CPOs: the Benefits and Limitations for Victims of Domestic Violence, National Center for State Courts Research Report, 1997.

CHILDREN

Domestic violence has immediate and long term detrimental effects on children.

- each year, an estimated 3.3 million children are exposed to violence by family members against their mothers or female caretakers.

American Psychl. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 11.

- in homes where partner abuse occurs, children are 1,500 times more likely to be abused.

Department of Justice, Bureau of Justice Assistance, Family Violence: Interventions for the Justice System, 1993.

- 40-60% of men who abuse women also abuse children.

American Psychl. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 80.

- fathers who batter mothers are 2 times more likely to seek sole physical custody of their children than are non-violent fathers.

American Psychl. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 40.

- in one study, 27% of domestic homicide victims were children.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p. 45, table 11

- when children are killed during a domestic dispute, 90% are under age 10; 56% are under age 2.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p. 51, table 28

DATING VIOLENCE

Violence against intimates may occur even though the victim does not live with her abuser.

- violence against women occurs in 20% of dating couples.
American Psychol. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 10.
- an average of 28% of high school and college students experience dating violence at some point.
Brustin, S., Legal Response to Teen Dating Violence, Family Law Quarterly, vol. 29, no. 2, 331 (Summer 1995) (citing Levy, In Love & In Danger: a teen's guide to breaking free of an abusive relationship, 1993).
- 26% of pregnant teens reported being physically abused by their boyfriends, about half of them said the battering began or intensified after he learned of her pregnancy.
Brustin, S., Legal Response to Teen Dating Violence, Family Law Quarterly, vol. 29, no. 2, 333-334 (Summer 1995) (citing Worcester, A More Hidden Crime: Adolescent Battered Women, The Network News, July/Aug., national Women's Health Network 1993).
- victims of dating violence report the abuse takes many forms: insults, humiliation, monitoring the victim's movements, isolation of the victim from family and friends, suicide threats, threats to harm family or property, and physical or sexual abuse. their abusers also blamed them for the abuse, or used jealousy as an excuse.
Brustin, S., Legal Response to Teen Dating Violence, Family Law Quarterly, vol. 29, no. 2, 336 (Summer 1995) (citing Gamache, Domination and Control: The Social Context of Dating Violence, in Dating Violence, Young Women in Danger, Levy, ed. 1991).
- 25 - 33% of adolescent abusers reported that their violence served to "intimidate," "frighten," or "force the other person to give me something."
Brustin, S., Legal Response to Teen Dating Violence, Family Law Quarterly, vol. 29, no. 2, 335 (Summer 1995).

SELF-DEFENSE

Many battered women attempt to physically defend themselves from abuse.

- marital homicide differs significantly by gender: a large proportion of the killings by women are acts of self-defense, while almost none of the killings by men are acts of self-defense.
Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project: Executive Summary, 1997.
- defensive action by battered women to protect themselves or their children is often interpreted by law enforcement as an act of domestic violence. the number of battered women arrested for committing acts of violence against their partners has disproportionately increased in communities that overuse "dual arrest."
Promising Practices Initiatives Report on the Expert Panels on Domestic Violence, Sexual Assault and Stalking Technical Assistance Project, U.S. Department of Justice, 1997.

PHYSICAL INJURY AND MEDICAL TREATMENT

Victims of domestic violence often require medical care, although they may conceal the cause of their injuries.

- female victims of violence are 2.5 times more likely to be injured when the violence is committed by an intimate than when committed by a stranger.
Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 4.
- because domestic abuse is an ongoing cycle producing increasingly severe injuries over time, battered women are likely to see physicians frequently.
Children's Safety Network, Domestic Violence: A Directory of Protocols for Health Care Providers (1992) p. (1).
- the rate of domestic violence detection by emergency room doctors is low.
Abbott et al., Domestic Violence Against Women: Incidence and Prevalence in an Emergency Department Population, Journal of the American Medical Association, vol. 273, no. 22, 1763, 1766 (June 1995).
- although battered women comprise 20 - 30% of ambulatory care patients, only 1 in 20 is correctly identified as such by medical practitioners.
Hyman et al., Laws Mandating Reporting of Domestic Violence: Do They Promote Patient Well-Being?, Journal of the American Medical Association, vol. 273, no. 22, 1781 (June 1995).
- one study found that less than 3% of women visiting emergency rooms disclosed or were asked about domestic violence by a nurse or physician.
Abbott et al., Domestic Violence Against Women: Incidence and Prevalence in an Emergency Department Population, Journal of the American Medical Association, vol. 273, no. 22, 1763, 1765 (June 1995).
- the use of emergency room protocols for identifying and treating victims of domestic violence has been found to increase the identification of victims by medical practitioners from 5.6% to 30%.
Children's Safety Network, Domestic Violence: A Directory of Protocols for Health Care Providers (1992) p. (1).
- 17% of those who visit emergency rooms for treatment are documented as having come as a result of being injured by an intimate.
Bureau of Justice Statistics: Violence-Related Injuries Treated in Hospital Emergency Departments (NCJ-156921), August 1997, p. 5.
- 37% of women injured by violence and treated in an emergency room were injured by an intimate; less than 5% of men injured by violence and treated in an emergency room were injured by an intimate.
Bureau of Justice Statistics: Violence-Related Injuries Treated in Hospital Emergency Departments (NCJ-156921), August 1997, p. 5.
- 243,000 people receiving emergency room treatment for violence-related injuries in 1994 had been injured by an intimate. female victims outnumbered males 9 to 1.
Bureau of Justice Statistics: Violence-Related Injuries Treated in Hospital Emergency Departments (NCJ-156921), August 1997, p. 5.
- "acute domestic violence" was the reason for 1 out of 9 patients emergency room visit among women with a current partner.
Abbott et al., Domestic Violence Against Women: Incidence and Prevalence in an Emergency Department Population, Journal of the American Medical Association, vol. 273, no. 22, 1763, 1765 (June 1995).
- one study of women visiting emergency rooms for treatment found that 54% had been threatened or injured by an intimate partner at some time in their lives, and 24% reported having been injured by their current partner in the past.
Abbott et al., Domestic Violence Against Women: Incidence and Prevalence in an Emergency Department Population, Journal of the American Medical Association, vol. 273, no. 22, 1763, 1765 (June 1995).

LAW ENFORCEMENT

Intervention of the police and the court system can be improved in domestic violence cases.

- every state allows its police to arrest perpetrators of misdemeanor domestic violence incidents upon probable cause, and more than half of the states and the district of columbia have laws requiring police to arrest on probable cause for at least some domestic violence crimes.

Zorza, Mandatory Arrest for Domestic Violence: Why it may prove the best first step in curbing repeat abuse, Criminal Justice, vol. 10, no. 3, p. 66 (Fall 1995).

- only about one-seventh of all domestic assaults come to the attention of the police.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p. 3.

- female victims of domestic violence are 6 times less likely to report crime to law enforcement as female victims of stranger violence.

American Psychol. Ass'n, Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family (1996), p. 10.

- when an injury was inflicted upon a woman by her intimate partner, she reported the violence to the police only 55% of the time. she was even less likely to report violence when she did not sustain injury.

Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 5.

- some studies indicate that arresting a batterer increases recidivism, while some studies indicate that arrest serves as a deterrent for future domestic violence.

Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 46 (1996).

- arresting a batterer may reduce violence in the short term, but may increase violence in the long term.

Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 43, 49 (1996).

- the varying effect of arrest on abusers may be related to the amount the batterer has to lose from facing the social consequences of arrest. the single most consistent result of studies of the effect of arrest on batterers is that unemployed suspects become more violent after an arrest, and employed suspects do not.

Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? pp. 48-49 (1996).

- even if arrest may not deter unemployed abusers, arrest still deters the vast majority of abusers.

Zorza, The Criminal Law of Misdemeanor Domestic Violence, 1970-1990. The Journal of Criminal Law & Criminology (Northwestern School of Law), vol. 83, no. 1, p. 66 (1992).

- possession of a gun by anyone subject to a protection order is prohibited by federal law.

The Violent Crime Control and Law Enforcement Act of 1994, 18 U.S.C. 922(g)(8).

- purchase or ownership of a gun by anyone convicted of a misdemeanor domestic violence offense is prohibited by federal law.

Domestic Violence Offenders Gun Ban (1996), 18 U.S.C. 922(g)(9).

PROTECTION ORDERS

Protection orders decrease, but do not eliminate, the risk of continuing abuse or homicide.

- a protection order issued by one U.S. state or Indian tribe is valid and enforceable in any other U.S. state or Indian tribe.
Violence Against Women Act of 1994, 18 U.S.C. 2265.
- in cases of marital or dating violence, which accounted for 82% of all protection order cases, 90% of defendants were male.
Adams & Powell, Tragedies of Domestic Violence: A qualitative analysis of civil restraining orders in Massachusetts, Office of the Commissioner of Probation, Massachusetts Trial Court, p. 9 (1995).
- 35% of women with temporary protection orders did not return for a protection order because respondent stopped battering her; 17% because service of process was not achieved.
CPOs: the Benefits and Limitations for Victims of Domestic Violence, National Center for State Courts Research Report, 1997.
- more than 17% of domestic homicide victims had a protection order against the perpetrator at the time of the killing.
Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p.46, table 15.
- although the majority of batterers do not have criminal records, the majority of batterers brought to court by their victims for a protection order had criminal records.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 10 (1996).
- protection order defendants who had prior criminal histories were more likely to violate the order than those who did not.
Adams & Powell, Tragedies of Domestic Violence: A Qualitative Analysis of Civil Restraining Orders in Massachusetts, Office of the Commissioner of Probation, Massachusetts Trial Court, p. 17 (1995).
- in one study, nearly half of the victims who obtained a protection order were re-abused within two years.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 10 (1996).
- the majority of women who seek temporary protection orders have complaints of serious abuse: physical assaults, threats to kill or harm her, or attempts or threats to take the children.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 216 (1996).
- in one study of women seeking temporary protection orders, 56% has sustained physical injuries.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 216 (1996).
- 60% of women in one study reported acts of abuse after the entry of a protection order, and 30% reported acts of severe violence.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 223 (1996).
- entry of a protection order did not appear to deter most types of abuse, but it did significantly reduce the likelihood of acts of psychological abuse such as preventing the victim from leaving her home, going to work, using a car or telephone, and stalking and harassing behaviors.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 228-229 (1996).
- one study showed 80% of women with temporary protection order said the order was somewhat or very helpful in sending the batterer a message that his actions were wrong. less than 50% of the women thought that the batterer believed he had to obey the order.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 218 (1996).
- most violations of protection orders leading to an arrest occurred within 90 days of the entry of the order.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 200 (1996).

- 60% of those obtaining protection orders in one study reported violations within one year.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 240 (1996).
- calls to police due to violations of protection orders were high, but the arrests were rare.
Buzawa & Buzawa ed., Do Arrests and Restraining Orders Work? p. 239 (1996).
- 17% of protection orders defendants in a 1995 study were arraigned for a violation of the order within one year.
Adams & Powell, Tragedies of Domestic Violence: A Qualitative Analysis of Civil Restraining Orders in Massachusetts, Office of the Commissioner of Probation, Massachusetts Trial Court, p. 15 (1995).<
- 6% of protection order defendants were convicted of violating the order.
Adams & Powell, Tragedies of Domestic Violence: A Qualitative Analysis of Civil Restraining Orders in Massachusetts, Office of the Commissioner of Probation, Massachusetts Trial Court, p. 17 (1995).

STALKING

Batterers may attempt to frighten or control their victims through stalking.

- some advocates believe up to 80% of stalking cases occur within intimate relationships.
Domestic Violence, Stalking and Anti-Stalking Legislation, an Annual Report to Congress under the Violence Against Women Act, National Institute of Justice Research, April 1996, p. 3.
- if stalking occurs within an intimate relationship, it typically begins after the woman attempts to leave the relationship.
Domestic Violence, Stalking and Anti-Stalking Legislation, an Annual Report to Congress under the Violence Against Women Act, National Institute of Justice Research, April 1996, p. 1.

SEPARATION VIOLENCE

When a woman leaves her batterer, her risk of serious violence or death increases dramatically.

- separated/divorced women are 14 times more likely than married women to report having been a victim of violence by their spouse or ex-spouse.
Bureau of Justice Statistics: Female Victims of Violent Crime, 1991.
- women separated from their husbands were 3 times more likely to be victimized by spouses than divorced women, and 25 times more likely to be victimized by spouses than married women.
Bureau of Justice Statistics Special Report: Violence Against Women: Estimates from the Redesigned Survey (NCJ-154348), August 1995, p. 4.
- 65% of intimate homicide victims physically separated from the perpetrator prior to their death.
Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p.47, table 17.

HOMICIDE

Domestic homicide is often the culmination of an escalating history of abuse.

- female homicide victims are more than twice as likely to have been killed by an intimate partner than are male homicide victims.
Bureau of Justice Statistics: Female Victims of Violent Crime, December, 1996.
- 88% of victims domestic violence fatalities had a documented history of

physical abuse.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, pp 46-48, tables 14-21.

- 44% of victims of intimate homicides had prior threats by the killer to kill victim or self. 30% had prior police calls to the residence. 17% had a protection order.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, pp.46-48, tables 14-21.

- for homicides in which the victim-killer relationship was known, 31% of female victims were killed by an intimate. 4% of male victims were killed by an intimate.

Bureau of Justice Statistics Special Report: Sex Differences in Violent Victimization, 1994 (NCJ-164508), September, 1997, p. 1.

- 70% of intimate-partner homicide victims are women.

Bureau of Justice Statistics Selected Findings: Violence Between Intimates (NCJ-149259) November, 1994.

- a woman is the perpetrator in 19% of domestic homicides.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p. 44, table 7.

- when a woman is the perpetrator of a domestic homicide, typically the abuser was killed during an assaultive incident in which the woman was the victim.

Browne, When Battered Women Kill, pp. 135-137 (1987).

- in a 1967 study, 60% of husbands who were killed by their wives precipitated their own deaths by being the first to use physical force or threaten with a weapon.

Browne, When Battered Women Kill, p. 10 (1987).

- homicides committed by victims during a battering incident were often committed with the abuser's own weapon.

Browne, When Battered Women Kill, p. 140 (1987).

- a 1978 study found that almost all of the wives who had killed their husbands had previously been beaten by their husbands.

Browne, When Battered Women Kill, p. 10 (1987).

- of women killed in 1992, their relationship to the killer was known in 69% of homicides. of this percent, 28% were killed by spouse, ex-spouse, boyfriend or ex-boyfriend.

Bureau of Justice Statistics: National Crime Victimization Survey, 1995.

- of men killed in 1992, their relationship to the killer was known in 59% of homicides. of this percent, 3% were killed by spouse, ex-spouse, girlfriend or ex-girlfriend.

Bureau of Justice Statistics: National Crime Victimization Survey, 1995.

MULTIPLE-VICTIM HOMICIDE

In some domestic homicides, the perpetrator kills more than one person.

- in 1994, 38% of domestic homicides were multiple-victim, usually combining a spouse homicide and suicide, or child homicide.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p.45, table 12.

- where there are multiple victims in a domestic homicide, 89% of perpetrators are male.

Florida Governor's Task Force on Domestic and Sexual Violence, Florida Mortality Review Project, 1997, p.52, table 29.

HEARING & MEETING AGENDAS

Hearing & Meeting Agendas

Jefferson City September 13, 1999

10:00 a.m - 1:00 p.m. Organizational meeting

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; and Rep. Doratheia Davis.

Two invited witnesses offered oral and written testimony:

Colleen Coble	Nina Balsam
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1:00 p.m - 5:00 p.m. Public hearing

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; and Rep. Mary Kasten.

Fourteen witnesses offered oral and written testimony:

Richard Matt	Becky Houf	Jay Nixon
Mary Steele	Deborah Borchers-Ausmus	Vickie Scott
Dora Schriro	Dianna Moore	Juanita Davis
Keith Wenzel	Marilou Joyner	Tricia Schlechte
Dr. Roy Wilson	Karla M. McLucas	

Jefferson City September 14, 1999

8:30 a.m. - 12:00 p.m. Working meeting

Members present: All

**Florissant
October 12, 1999**

10:00 a.m. - 1:30 p.m. Public hearing

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; Rep. Carson Ross; and Rep. Mary Kasten.

Two witnesses offered oral and written testimony:

Judge Thomas Frawley Elizabeth Ray

**Jefferson City
October 26, 1999**

10:00 a.m. - 4:00 p.m. Public hearing

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; Rep. Carson Ross; and Rep. Dorathea Davis.

Eleven witnesses offered oral and written testimony:

Mark Koch	Sharon Feltman	Teddy J. Jensen
Sherri J. Crider	Larry Weber	Nancy Griggs
Maj. Gene Lacy	Kathi Harness	Brent Butler
Colleen Coble	Susan M. Johnson	

**New Madrid
November 1, 1999**

1:00 p.m. - 5:00 p.m. Public hearing

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Pat Dougherty; Rep. Barbara Fraser; Rep. Carson Ross; Rep. Mary Kasten; and Rep. Doratheia Davis.

Nine witnesses offered oral and written testimony:

Mary Ann Allen	Marsha L. Keene	K. Andrew Sneathern
Karla J. Cooper	Jayne F. Dees	Lisa Ledbetter
Kristina D. Peirce	Emily Winchester-Ryan	
H. Morley Swingle (written only)		

St. Louis
November 2, 1999

11:00 a.m. - 12:30 p.m. Tour - Kathy J. Weinman Children's Advocacy Centre

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; and Rep. Carson Ross.

1:00 p.m. - 6:30 p.m. Public hearing

Members present: All

Twenty-two witnesses offered oral and written testimony:

Dr. Virginia K. Drake	Jeanne Meaurer	Susan Dersch
Mariano Favazza	Greg Evans	Nina Balsam
Barbara Flory	Adrienne Cochrane	Barbara Bennett
Carrie Costantin	Edmund J. Postawko	Lt. Mary J. Warnecke
Roger L. Dixon	Elvinias Clower Webb	Cathy Blair
Bill Hemby	Judge Jack Garvey	Kathleen Tofall
Mark L. Robinson	Judge Melvyn Wiesman	Chris Chitwood
Daniel Cytron (written only)		

Springfield
November 3, 1999

1:00 p.m. - 6:00 p.m. Public hearing

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; Rep. Carson Ross; and Rep. Mary Kasten.

Twenty witnesses offered oral and written testimony:

Judge Dan Conklin	Martha J. Sander	D. Scott Tanner
Sandra Ackerman	Dorothy Dewitt	Larry Copelin
Dr. Sherry L. Gant	Angela Morris	Stella Harrison
JoAnn Bartusch	Mark Spaeny	Becky Vermeire
Nancy Berlin	Robert G. Asperger, III	Peggy Hedrick
Robert S. Bassett, Jr.	Rep. Mike Schilling	Velicia Peters
Fran Stein	Theresa J. Schulz (written only)	

Kansas City
November 4, 1999

12:15 p.m. - 5:30 p.m. Public hearing

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; and Rep. Carson Ross.

Twenty-five witnesses offered oral and written testimony:

Kelly J. Moorhouse	Donna Devine	Dr. Robert Watkins
Becky Houf	Jenifer Valenti	Lori Fluegel
Bob Beaird	Mark Tracy	Linda Spence
Carolyn N. Pratt	Dr. Sharon Portwood	Christi Campos
Joyce Horton	Sgt. Kate Ellis	Jacqie Spradling
Lynn Allen	Melissa W. Thibodeaux	Jan Kauk
Rose Kemp	Rene Renick	Sue Else

Susan Miller
Wanda Lowenstein

Leslie Caplan

Palle Rilinger

Columbia
November 10, 1999

10:30 a.m. - 4:15 p.m. Public hearing

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; and Rep. Mary Kasten.

Twenty-one witnesses offered oral and written testimony:

Colleen Coble
Elizabeth Ray
E. Leigh Voltmer
Teresa Byars
Linda Dudgeon
Mark Koch
Sgt. Zim Schwartz

Mary Ann Allen
Michelle Schiller-Baker
June O'Brien
Michael J. Sudekum
Chris Long
Mark Gutchen
Lorraine York

Nina Balsam
JoAnn Bartusch
Bridie Brooks
Lauren Perkins
Geoffrey W. Preckshot
Susan Jane Decker
Rep. Beth Long

Columbia
November 11, 1999

10:00 a.m. - 4:00 p.m. Working meeting

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; and Rep. Carson Ross.

One invited witness offered oral testimony: Joe Moseley

Jefferson City
December 7, 1999

9:30 a.m. - 2:30 p.m. Working meeting

Members present: Rep. Vicky Riback Wilson (Co-Chair); Rep. Bill Luetkenhaus (Co-Chair); Rep. Pat Dougherty; Rep. Emmy McClelland; Rep. Cindy Ostmann; Rep. Barbara Fraser; Rep. Carson Ross; and Rep. Mary Kasten.

SUBCOMMITTEE REPORTS

Protocols, Screening and Coordinated Approaches
Sub Committee - report - Barbara Wall Fraser

We received considerable information from service providers, and other professionals-

Suggestions from the Domestic Violence sub committee - -

1) Money needs to be put into the coordinated approaches system --
Protocols and screening can not be separated from funding issues- The
demands on core services (shelters) increases when other services
are improved The reason some of these self help centers have even
begun is because of grants from Public Safety or federal dollars--
Efforts in different counties are seriously different in terms of
quality and capability - If we fund this through the State --I would
suggest that we insure that the example of Independence-- Hope House
- sensitive, trained police, a dynamic prosecutor and "trained
Judges" and an education system that teaches awareness from K-12--
plus an awareness throughout the area in the business, labor and the
dept. of mental health (I don't think the medical community is as
"tuned in ") -

2) Make Domestic Violence a crime - which can be similar to the 'hate
crimes law- Hold abusers for 40 hours

3) Affect change by requiring courses on Domestic Violence in
Licensing of Physicians, Health Care Personnel, Social Workers and
Law Enforcement-- Also strongly encourage Lawyers and Judges to be
trained -

4) Educate, Educate, Educate!!! K-12 and social workers, lawyers,
health care people, business people etc. -- We CAN do this!!!

5) Unified reporting system

6) Require 40 hours of training for mediators - Make sure there is
opportunity for victim to attend if O.P. is in place—if she wants to attend
the mediation -

. Barbara Fraser, coordinator

- > Sandy Lueckenhoff, Legislative Research
- > Cathy Blair, Barnes Jewish Hospital, St. Louis
- > Donna Devine, (Mediation, Social Worker), Olathe, Kansas
- > Sue Else, Hope House, Kansas City
- > Colleen Coble, Missouri Coalition Against Domestic Violence
- > Chris Heisel, (Probation & Parole), St. Louis
- > Adrienne Cochrane, St. Louis

- > Greg Wilkinson, Independence Police Department, Independence
- >
- > The subcommittee discussed a variety of topics related to protocols and
- > screening, and provided valuable information and insight on possible models
- > for other programs in the state.
- >
- > 1. Cathy Blair, a registered nurse and licensed social worker, emphasized
- > the need for health care professionals to be trained on the proper methods
- > of screening and appropriate responses when domestic violence situations
- > may be present. She believes there are protocols and screening guidelines
- > currently in place, but most institutions do not implement those
- > guidelines. Many women are abused but never report it - All women go to an
- > OB-GYN relatively frequently -- This is a window of opportunity for
- > professionals to ask the right questions and recommend the possible options
- > a woman would have -- This is probably rarely not or never done -today. She
- > also supports a unified reporting system, but adamantly opposes any
- > mandatory reporting system for the health care system. The key piece here
- > is that No one is sure of the outcomes when they "report" i.e. -- is the
- > woman re-beaten or -- worse case -does she then just never come to the
- > emergency room or her doctor again -- (that is what usually happens now if
- > someone is "reported" -- Better to help the victim_) C. Blair endorses a
- > system, similar to the State of Florida, which requires a specified number
- > of hours of domestic violence training before a health care professional
- > could be licensed. The obvious LACK of professional training to health care
- > professionals was discussed. Is there a change opportunity here?
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- > 2. Adrienne Cochrane, a licensed therapist who graduated from law school,
- > spoke on a program called Combined Community Response which is funded by a
- > federal block grant. This program provides 4 full time and 2 part time
- > legal advocates 24 hrs. a day for victims. Included in this grant is
- > funding for intervention services for batterers. This program is in its
- > first full year, so there are no available statistics on the program.
- >
- > 3. Chris Heisel, probation and parole, believes that there is a great need
- > to increase the awareness, sensitivity and training of judges on domestic
- > violence. She also believes that any programs that are currently in place
- > are secondary to the coordinated response that is needed. No one program
- > can succeed without the communities involvement and support.
- > Something IS NOT better than nothing -- Key difference between success and
- > failure is Leadership -- must get rid of Turf issues everyone must be at
- > the table..
- > Judges are a key part of the "response to the victim and batterer".
- > Domestic Violence is a CRIME.
- > Is there a change opportunity here?
- >
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- > 4. Donna Devine, a licensed social worker, spoke on the utilization of

- > mediation in domestic violence cases. By Supreme Court rule, Missouri
- > requires mediators to have 20 hours of training, but there is no specific
- > requirement that any of that training be in the area of domestic violence.
- > Some states require 40 hours of training. ABA has curriculum on mediation
- > In addition, Donna believes that there needs to be a case screening
- > mechanism which allows victims to attend mediation sessions even if an
- > order of protection is in place. Is there a change opportunity here?
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- > 5. Sue Else, Hope House, spoke about the wonderful coordination that is
- > occurring in Independence, Missouri, through the Independence Coordinated
- > Community Council which was formed 3 years ago. The council includes the
- > superintendent of schools, the chief of police, municipal and state court
- > judges, victims, labor, the chamber of commerce and the department of
- > mental health. The council meets 4 times a year and supervises the various
- > committees that are formed and ensures that those committees actually meet.
- >
- >
- > The committees address issues such as domestic violence school
- > curriculums, training of employers and supervisors and neighborhood watch
- > programs. Grant money also goes for public awareness campaigns.
- > In addition, the six shelters in the Kansas City metro area now have a
- > computer software program that allows a person to make only one phone call
- > to receive the necessary services. This program links the six shelters so
- > if one shelter is at capacity, a person can be referred to a shelter which
- > has beds available.
- > Also there is electronic filing of ex-parte --24hours so victims do not
- > have to "wait til Monday" to have a protection order. When a victim goes to
- > a safe house, there is an advocate assigned to her to help her with the
- > forms etc.
- >
- > 6. Greg Wilkinson, Independence police department, discussed the
- > coordination with Hope House and the Council that his police department
- > has. He related a number of incidents where the coordination between the
- > council and his department worked effectively to provide a safe outcome for
- > victims. He noted that Domestic Violence is a CRIME. He also strongly
- > believes that part of the problem is the lack of response by judges and
- > believes that training of law enforcement, judges, prosecutors and health
- > care professionals is key. He described his rookie police training --
- > sensitive and "smart" Role playing involved-- "the violence" stops here-
- > Everyone in the community coordinated program is using the same
- > message-bill boards, bus signs, Events- Community trains its own group -
- > i.e. train the trainers-- Train everyone - police, businessmen, labor-
- > etc.- Does the system work- does woman make it to court - is there follow
- > up-- key Many Batterers get away with murder-- People who write bad checks
- > are thrown in jail for years-- Attitude of society is that it is OK to beat
- > wife?? Is there a change opportunity here?
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- > 7. Colleen Coble, Missouri Coalition Against Domestic Violence, summarized
- > the meeting and made five key points:

- > 1. Protocols and screening cannot be separated from funding issues. This
- > kind of program costs --
- > 2. Training needs to occur to support the community endeavors and such
- > training must be done by professionals with expertise in the area of
- > domestic violence.
- > 3. The leadership in the domestic violence provider community must be the
- > ones to build the necessary coordination because they have the expertise
- > and years of experience to best address the needs.
- > 4. We must be very aware of the potential for unintended consequences. In
- > some cases no action may be better than the wrong action.
- > 6. The demands on core services, such as shelters, increases when other
- > programs are improved. For example, if law enforcement and health care
- > professionals respond better and make the proper interventions, the number
- > of referrals to shelters increases.
- > Watch out for unintended circumstances-- Some public policy issues Cost a
- > life --
- >
- >
- > Other thoughts --
- > - No mandatory reporting-
- > -Should we have an advisory commission to plan a coordinated approach..
- > reps. Sen. Dept. of mental health safety, doctor, lawyer..
- > -Standard -for Judges- Lawyers-
- > -What do we teach medical personnel? Social workers - about domestic
- > violence??
- > -Are schools doing their job in this area-
- > - What about k-12- awareness?/
- > -How can we make sure the advocate is a good one??
- > -Screening - Well done???- universal screening - determining signs and
- > symptoms. Make this broader??
- > -Statistics?
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Interim Committee on Domestic Violence

Civil and Criminal Law Subcommittee Report - Rep. Cindy Ostmann, Co-chair

As co-chair of the Civil and Criminal Law Subcommittee for the Interim Committee on Domestic Violence, I offer the following recommendations for consideration by the committee as a whole. These recommendations reflect the changes in state statute most consistently suggested in testimony before the committee.

1. Redefine "relationship" within the definition of domestic violence. Current definition fails to address more recent relationships in which violence is occurring—for example, girlfriend/boyfriend.
2. Create the crime of Domestic Violence.
 - a. Increase the penalties for Domestic Violence
 - b. Allow past acts of domestic violence to be considered in assessing penalties. Incremental penalties are suggested.
 - c. Increase the "holding period" following arrest to at least 36 hours, preferably 48 hours.
 - d. Increase the amount of bond required and consider requiring that bond to be paid in cash.
 - e. More severe penalties when choking is involved in the attack and when the victim's ability to communicate is cut off, such as phone lines cut, phone disconnected, phone ripped from wall, etc.
3. Eliminate or modify the spousal immunity state. Rep. Hollingsworth's HB 961 is a sample of a possible modification.
4. Allow "excited utterances" to stand as an exception to the hearsay rule of evidence in Missouri.
5. Consider steps to restrict gun possession by batterers. (Sample provided in Robert McCulloch's written testimony.)
6. Revise the stalking law to take into consideration stalking by e-mail, fax, and the Internet.

7. To provide further protection to children who are under visitation orders but where abuse by the custodial or non-custodial parent is suspected, a suggestion was made to provide a process that will quickly put into place a "Child's Order of Protection" that overrules the Order of Visitation until the charges of abuse are investigated.

In my one-on-one visits with people in my communities who deal with the problems of Domestic Violence, on a daily basis in some cases, I had some very candid conversations. One comment made by a judge who hears these cases struck me as being a "bottom line" in breaking the "Cycle of Violence."

"Domestic Violence could be dramatically impacted if the Prosecuting Attorneys would declare a "No Tolerance" policy on Domestic Violence and instruct that office that a "no drop" policy was now in effect and that his intention was to go forward with all cases of Domestic Violence."

He said that part of this "get tough" policy should include mandatory jail time. His experience is that a batterer will pay any amount and do anything to avoid having to serve jail time. He says that as little as two or three days makes a real impact on these people. For that reason he feels the jailing of batterers should have a much higher priority than it does.

Rep. Cindy Ostmann
11/10/99

**DEPARTMENTAL
DOMESTIC VIOLENCE
MATERIALS**

DEPARTMENT OF SOCIAL SERVICES

DIVISION OF FAMILY SERVICES

P.O. BOX 88

JEFFERSON CITY, MISSOURI 65103

December 21, 1998

MEMORANDUM

TO: AREA EXECUTIVE STAFF, COUNTY DIRECTORS AND
CHILDREN'S SERVICES STAFF

FROM: CARMEN K. SCHULZE, DIRECTOR *Carmen K. Schulze*

SUBJECT: INTRODUCTION OF DOMESTIC VIOLENCE POLICY,
PROTOCOL, AND BEST PRACTICE REGARDING
FAMILIES THAT DEMONSTRATE INDICATORS OF
DOMESTIC VIOLENCE

REFERENCE: CHILDREN'S SERVICES

DISCUSSION:

The purpose of this memorandum is to introduce staff to procedural and reference material for the identification, assessment, and intervention with families that exhibit indicators of domestic violence.

A growing body of clinical experience and research indicates that domestic violence and child abuse/neglect are frequently present in the same families. The overlap between child abuse and domestic violence concerns child welfare agencies for two reasons. First, children are at greater risk in families where both child abuse and domestic violence exist. Child Abuse is 15 times more likely to occur in families where domestic violence is present (Stacey and Shupe, 1983). Second, children are harmed emotionally as well as physically by domestic violence. Children may sustain physical injuries as a result of being struck by a blow directed at the adult,

trying to intervene in the violent episode, or as a deliberate target of the violence. In addition to the physical injuries sustained, children who witness domestic violence exhibit more aggressive, antisocial, fearful, and inhibited behaviors (Jaffe and Sundermann, 1995). These children also demonstrate lower social competence, anxiety, and depression (Jaffe, 1995).

Several shifts in traditional child protection practice are necessary to adequately address the interaction between child abuse and domestic violence. These shifts include:

1. Identifying and assessing domestic violence in conjunction with other child welfare issues;
2. Providing services to families referred to the agency for child abuse and neglect that will assist abused parents in protecting themselves and their child, using non-coercive, supportive interventions; and
3. Documenting in the case record the violent behaviors of the domestic violence offender that put the child and adult victim at continued risk of harm.

Shifts in how the issue of domestic violence is addressed does not change the criteria of what constitutes a hotline report to the Central Registry Unit. They serve as a guide for staff to use in addressing domestic violence with families. The primary focus of staff's intervention with families remains the assessment of safety and risk factors that influence the child's functioning. In conducting comprehensive family assessments and investigations as a result of child abuse and neglect reports, staff are responsible for addressing issues of domestic violence. Staff shall recognize indicators of domestic violence, determine how domestic violence impacts the safety of the child and adult victim, and implement strategies that will reduce risk to the child and if possible adult victim.

Operating Definition:

Domestic violence is a pattern of assaultive and coercive behaviors, including physical, sexual, and psychological attacks, as well as economic coercion, that adults or

adolescents use against their intimate partners where the perpetrator and victim are currently or have been previously dating, cohabiting, married, or divorced.

Protocol for Development of a Systems Approach to Domestic Violence:

The following information outlines protocol developed to provide direction for staff in identification, assessment, and intervention with families at risk of or demonstrating patterns of domestic violence in conjunction with child abuse and neglect. These protocols do not change "Best Interest of the Child" practice, they are to clarify ongoing practice with families who are impacted by domestic violence.

- Identification procedures for domestic violence should include routine, direct inquiry with families regarding the effects this may have on all of the family members. The identification process should be ongoing during all phases of working with the family, as violence can surface at any point. Staff should make every effort to interview the adult victim separate from the suspected domestic violence offender to prevent jeopardizing the victim's safety.
- Once domestic violence has been identified through the comprehensive assessment, staff should assess the extent of danger posed to the child. Factors affecting child safety include: ongoing risk of harm present to the child and the adult victim by the offender; physical, emotional, and developmental impact of domestic violence on the child; and strategies the abused parent has used in the past to protect the child that can be reinforced for future safety.
- Interventions with families who demonstrate a presence of domestic violence should strive to protect the child first and foremost, assist the abused parent in protecting her/himself and the child, and hold the offender accountable for his/her violent behaviors by documentation of these behaviors in the case file. This documentation should include information regarding how the violence has inhibited the adult victim from protecting and caring for the child, caused direct harm to the child, and caused direct harm to the adult victim.

- Collaboration building with Domestic Violence Service Providers in the local community is essential for quality service provision. The expertise of these service providers can be valuable in developing case plans and/or safety plans with the family.

Duty to Warn:

Staff have an obligation to warn the intended victim of violence if that victim is readily identifiable. Therefore, if staff are aware of threats to any adult, they must take affirmative steps to warn that person. These steps may include; notification of the threat, referrals for shelter, contact with law enforcement, etc.

Documentation:

Documentation of domestic violence in the case records must be done in a manner that does not further jeopardize the safety of the child and adult victim. Accurate documentation of the offender's violence in the home can demonstrate his/her responsibility for the harm or risk of harm to the children.

- Any documentation of domestic violence will be placed in a separate section of the family's case record. Forms of documentation may include; orders of protection, police reports, witness statements, victim statements, etc. This section will not be released to the domestic violence offender. The Domestic Violence Section of the case record will have a red cover sheet. The cover sheet will indicate to all persons who handle the file that there is an issue of safety for the family due to domestic violence. This measure will also assure information that may jeopardize the safety of family members will not be released to the domestic violence offender when record transfers between workers or counties take place.
- Documentation of the domestic violence offender's role in the violent episodes and how that behavior impacts the safety and well-being of the child and the adult victim should be placed in the case record. This documentation will be valuable for guiding staff in developing case plans with families and offering appropriate services.

- Find Probable Cause of emotional maltreatment to the child by the domestic violence offender if he/she has exposed the child to violence in the household. To establish emotional maltreatment, a qualified professional (psychologist, psychiatrist) must specify evidence of substantially diminished psychological or intellectual functioning attributable to the caretaker's conduct. (See Emotional Maltreatment Section of the Investigation Handbook).

Confidentiality:

The documentation and disclosure of domestic violence may dramatically increase risk to the adult victim and child. Therefore, confidentiality is crucial for the safety and well-being of children and adult victims. Staff should honor the request of an adult victim to keep confidential information regarding instances of domestic violence and safety planning. Yet, it is imperative to inform families up-front issues which compromise the safety of children will be addressed with the family.

- General comments regarding domestic violence may be recorded in the narrative section of the file. These comments may represent the worker's observations of domestic violence indicators or general discussion with the family regarding the issue. However, specifics that may place the adult victim or child in greater danger, such as the adult victim's disclosure of violent incidents or future plans for escape, shall not be included in the narrative section and should only be recorded in the domestic violence section of the case record.
- In instances when information from the case record must be shared, per order of the court, and may be made available to the domestic violence offender, the adult victim should be notified in advance so she/he may plan for her/his safety and the safety of her/his child.
- Sharing of information among Income Maintenance, Child Support Enforcement, and Children's Services staff is important in reducing the number of times the family must repeat the same information. Staff are encouraged to share information regarding domestic violence across program lines while maintaining confidentiality with

respect to specific child abuse and neglect information. Both Income Maintenance and Child Support Enforcement policies protect information that may place victims of domestic violence at greater risk.

During child abuse/neglect investigations and assessments staff are faced with addressing many factors that impact the safety of children. Domestic violence is one of the many factors that should be part of the comprehensive assessment completed with the family.

References:

Jaffe, P., (1995) "Children of Domestic Violence: Special Challenges in Custody and Visitation Dispute Resolution," in Lemon, N.K., *Domestic Violence and Children: Resolving Custody and Disputes*, Family Violence Prevention Fund, San Francisco.

Jaffe, P. & Sunderman, (1995) "Child Witness of Women Abuse: Research and Community Responses," in Understanding Partner Violence Prevalence, Causes, and Consequences, and Solutions. Eds. Stith, S. & Straus, M., *Families in Focus Services*, Vol. II.

Stacey, W. & Shupe, A. (1983) *The Family Secret*. Boston, MA. Beacon Press.

Necessary Action:

1. Immediately review this Memorandum with all Children's Services staff.
2. Replace Procedure A-1, A-2, A-3, A-3 Attachment E, A-3 Attachment F, A-3 Attachment G, A-9, and the Definitions section in the Investigations Manual.

Replace Procedure D-1 Attachment A, D-1 Attachment D, D-2, D-3, D-26 Attachment B, and the Definitions section of the Alternative Care Manual.

Replace Chapter C-2 and Chapter C-9 of the Family-Centered Services Manual.

Add Reference Chapter to Investigation Manual as Appendix G, Family-Centered Services Manual as

Reference Chapter 15, Family-Centered Out-of-Home Care Manual as Reference Chapter 9, and Investigation/Family Assessment and Services Protocol Manual as Reference Chapter 1.

3. All comments and recommendations regarding this subject should be sent in writing to the Supervisor of the Child Protective Services Unit of the Children's Services Section.
4. All questions regarding specific case situations, as related to these procedures, should be cleared through normal supervisory channels.

CKS:CB

PROTECTING

VICTIMS OF DOMESTIC VIOLENCE

- How Missourians can obtain protective court orders
- Who to call for safe shelters and counseling services
- Where shelters are located in Missouri

A

GUIDE

FROM ATTORNEY GENERAL
JEREMIAH W. (JAY) NIXON



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Revised May 1997

Victims of Crime Act (VOCA)

INTRODUCTION

The Victims of Crime Act (VOCA) of 1984 was passed by Congress to assist states in providing high quality services that directly improve the health and well-being of victims of crime. The U.S. Department of Justice, Office for Victims of Crime, administers these funds at the federal level, and the Missouri Department of Public Safety administers the VOCA funds at the state level.

ALLOCATION OF FUNDS

The state of Missouri must allocate at least ten percent (10%) of this total to each of the three priority categories, victims of sexual assault, spouse abuse, and child abuse, and at least ten percent (10%) to programs which serve victims determined by the state to have been previously underserved. The definition of previously underserved victims of crime includes: burglary victims (especially the elderly and indigent), adult survivors of incest, survivors of homicide victims, victims of assault, victims of robbery, and victims and survivors of victims of DWI crashes.

MATCH REQUIREMENT

Programs must provide a minimum of 20% of the total project cost as match. Match can be hard cash or inkind.

NON-SUPPLANTING

VOCA funds *cannot* be used to *supplant (take the place of)* existing funds which are presently being used to provide assistance to victims of crime. This rule does not apply to private, non-profit agencies.

ELIGIBLE APPLICANTS

Public and not-for-profit private agencies are eligible to apply for funds available through the Victims of Crime Act. Agencies may not receive Victims of Crime Act funds to supplant existing funds which are presently being used to provide assistance to victims of crime. The non-supplanting rule does not apply to private, non-profit agencies.

ELIGIBLE PROGRAMS

- *Victims of Sexual Assault Programs*
- *Victims of Spouse Abuse Programs*
- *Victims of Child Abuse Programs*
- *Programs serving Previously Underserved Populations of Victims of Violent Crime*
- *Other Victims Assistance Programs*

ELIGIBILITY REQUIREMENTS

The applicant agency *must utilize volunteers* in the provision of services unless the following circumstances exist and the contractor has obtained prior approval:

Statutory provisions bar the use of volunteers;

OR

Lack of volunteers exist after a sustained and aggressive recruitment effort.

The applicant agencies *must include provisions to promote* within the community served *coordinated public and private efforts* to aid crime victims so that the *best interests of the crime victim are served* and interagency communication is enhanced.

The applicant agency *must include provisions to assist* victims of crime in seeking available *crime victim compensation* benefits by coordinating its activities with the state compensation program which is operated by the *Division of Worker's Compensation*.

ELIGIBLE SERVICES

The following is a list of services for which the VOCA fund may be used. The applicant must provide at least one of the following services:

Crisis Intervention - This service shall meet the urgent emotional or physical needs of crime victims, i.e., 24-hour hotline to provide crisis intervention counseling and referral services, etc.

Emergency Services - This service may include temporary shelter for safe environment; repair of locks or boarding up windows to prevent immediate reburglarization; petty cash for transportation, food, shelter, first aid, medical assistance, and other necessities.

Support Services - This service may include follow-up counseling (for other than crisis reactions); guidance for resolving practical problems created by the victimization experience, acting on the crime victim's behalf; assistance in obtaining the swift return of property; intervention, as appropriate, with creditors and employers; referral to other sources of assistance.

Court Related Services - This service may include assistance in criminal justice proceedings including transportation to and from court, child care services, escort services, orientation to criminal justice system, scheduling and hearing notifications, case status information, preparation for testimony, victim impact statement, notice of outcome, restitution plan, etc.

Training - This service shall be limited to attending training programs that improve the service skills of persons within the applicant agency (salaried or volunteer) who provide direct services to crime victims. Training sessions must be held in the state of Missouri or a comparable geographic region.

Other - Other direct services to victims of crime not specifically mentioned previously may be provided, and eligibility will be considered.

CONTRACT PERIOD

The *Contract Period* for all VOCA contracts must be *October 1 through September 30*.

FILING PROCEDURE

Application packets can be obtained by returning the form provided. Applications for Contract must be completed and received by the Missouri Department of Public Safety, Office of the Director, by no later than *July 1st*. The deadline for submission is specifically outlined in each year's Application Packet. Funding decisions and awards will be made by October 1.

CONTACT PERSON

Any questions regarding the VOCA Victim Assistance Program may be directed to Vicky Scott, Todd Cole, or Laura Malzner, Department of Public Safety. Vicky, Todd, and Laura can be reached at (573) 751-4905.

STOP Violence Against Women

STOP VIOLENCE AGAINST WOMEN

The STOP Violence Against Women Grant Program is a formula block grant program authorized by Title IV of the Violent Crime Control and Law Enforcement Act of 1994. The Department of Public Safety has been designated as the agency responsible for administering these funds at the state level. The Office of Justice Programs within the U.S. Department of Justice oversees the program at the federal level. The STOP (Services - Training - Officers - Prosecutors) Violence Against Women Grant Program provides funding to units of state and local government and nonprofit, nongovernmental victim services programs for the purpose of developing and strengthening effective law enforcement and prosecution strategies to alleviate violent crime against women, and to develop and strengthen victim services in cases involving violent crime against women.

ALLOCATION OF FUNDS

Funds received by Missouri through the STOP Violence Against Women Grant Program must be distributed according to the following stipulations:

Allocate at least 25% of the total grant funds available to each of the following disciplines:

Law Enforcement
Prosecutors
Victim Services Providers

Give priority to areas of varying geographic size with the greatest showing of need;

Take into consideration the population of the geographic area to be served;

Equitably distribute monies on a geographic basis, including non-urban and rural areas of various geographic sizes; and

Ensure that the needs of previously underserved populations are identified and addressed in its funding plan.

MATCH REQUIREMENT

Programs must provide a minimum of 25% of the total project cost as match. Match can be hard cash or in-kind. Nonprofit, nongovernmental victim services programs funded through subgrants are exempt from the matching requirement.

NON-SUPPLANTING

Federal funds shall be used to supplement, not supplant, non-federal funds that would otherwise be available for expenditure on activities described in the Violence Against Women Act. Monies disbursed under this grant program must be used to fund new projects, or expand or enhance existing projects. These funds cannot be used to supplant or replace existing funds already allocated to funding programs. This requirement applies only to state and local public agencies.

ELIGIBLE APPLICANTS

Public and not-for-profit private agencies are eligible to apply for funds available through the Violence Against Women Act.

ELIGIBILITY REQUIREMENTS

Grantees and subgrantees shall develop a plan for implementation. The purpose of this planning process is to achieve a coordinated and integrated approach to the prevention, identification, and response to cases involving violence against women. By definition, a coordinated and integrated approach suggests a partnership among law enforcement, prosecution, the courts, victim advocates and service providers.

The overall goal of the STOP Violence Against Women Grant Program is to encourage states and localities to restructure and strengthen the criminal justice system's response to this problem; to draw on the experience of all the players in the system, including the advocate community; and to develop a comprehensive set of strategies to deal with these complex problems.

The development of such strategies necessitates collaboration among police, prosecutors, the courts, and victim services providers. Thus, the STOP Violence Against Women Grant Program requires that jurisdictions draw into the planning process the experience of nongovernmental victim services and state domestic violence and sexual assault coalitions, as well as existing state and local domestic violence and sexual assault task forces and coordinating councils, in addition to police, prosecutors, and the courts.

ELIGIBLE PURPOSES

The STOP Violence Against Women Grant Program funds may be used for the following purposes:

Training law enforcement officers and prosecutors to more effectively identify and respond to violent crimes against women, including crimes of sexual assault and domestic violence;

Developing, training, or expanding units of law enforcement officers and prosecutors specifically targeting violent crimes against women, including the crimes of sexual assault and domestic violence;

Developing and implementing more effective police and prosecution policies, protocols, orders, and services specifically devoted to preventing, identifying, and responding to violent crimes against women, including the crimes of sexual assault and domestic violence;

Developing, installing, or expanding data collection and communication systems, including computerized systems, linking police, prosecutors, and courts or for the purpose of identifying and tracking arrests, protection orders, violations of protection orders, prosecutions, and convictions for violent crime against women, including the crime of sexual assault and domestic violence;

Developing, enlarging, or strengthening victim services programs, including sexual assault and domestic violence programs; developing or improving delivery of victim services to racial, cultural, ethnic, and language minorities; providing specialized domestic violence court advocates in courts where a significant number of protection orders are granted; and increasing reporting and reducing attrition rates for cases involving violent crimes against women, including the crimes of sexual assault and domestic violence; and

Developing, enlarging, or strengthening programs addressing stalking.

CONTRACT PERIOD

The *Contract Period* for all Violence Against Women Act contracts will be January 1st through December 31st.

FILING PROCEDURE

It is anticipated that funding announcements will be mailed in August. Application packets can be obtained by returning the form provided in the announcement. Applications for Contract must be completed and received by the Missouri Department of Public Safety, Office of the Director, by the deadline in October. Funding decisions and awards will be made by January 1st.

PROGRAM CONTACT

Any questions regarding the Violence Against Women Act may be directed to Vicky Scott, Program Specialist, the Department of Public Safety. Vicky's telephone number is (573) 751-4905.

October 15, 1998

STATE SERVICES TO VICTIMS FUND

INTRODUCTION

The state's original victim assistance program was established under the auspices of the Department of Public Safety by the General Assembly with the adoption of 595.050, RSMo in 1981. With the passage of 595.100, RSMo (1988), the Services to Victims Fund was established. The Services to Victims Fund consists of money collected pursuant to section 595.045. Upon appropriation, this money shall be used solely for the administration of contracts for services to victims of crime pursuant to sections 595.050, 595.055, and 595.105.

ADMINISTERED BY

The Missouri Department of Public Safety administers the State Services to Victims Fund for victim assistance programs.

FUNDING SOURCE

The Crime Victims' Compensation Fund has been established in the *Missouri State Treasury*. A fee of five dollars is assessed as costs in each court proceeding filed in any court in the state for violation of a criminal law of the state, including an infraction and violation of a municipal or county ordinance. The exceptions include nonmoving traffic violations, excluding violations of weight limit and safety laws. No fee is collected when the proceeding or defendant is dismissed by the court or when costs are to be paid by the state, county, or municipality on behalf of an indigent defendant.

Each year \$250,000 is allocated to the Crime Laboratories Fund. Fifty percent (50%) of the balance goes into the Crime Victims Compensation Fund. *The remaining fifty (50%) goes to the State Services to Victims Fund.*

AMOUNT OF FUNDS

Approximately \$1.5 million to \$2 million is available annually for victim service agencies through the *State Services to Victims Fund*.

NON-SUPPLANTING

State Services to Victims Funds *cannot* be used by any agency to *supplant (take the place of)* existing funds which are presently being used to provide assistance to victims of crime.

ELIGIBILITY CRITERIA

Public and not-for-profit private agencies are eligible to apply for funds.

State Services to Victims Funds cannot be used to provide service to a victim of crime unless the *incident is reported* to an appropriate law enforcement office *within forty-eight hours* after its occurrence or within forty-eight hours after the victim of crime, a dependent, or a member of the family of the victim reasonably could be expected to make such a report, except in the case of domestic violence shelter programs.

State Services to Victims Funds *cannot be used* to provide services to a victim who was the *perpetrator or a principal or accessory* involved in the commission of the crime for which he otherwise would have been eligible for assistance.

State Services to Victims Funds cannot be used to provide services to a victim of crime who is injured as a result of the operation of a motor vehicle, boat or airplane unless the same was used as a weapon in a deliberate attempt to inflict personal injury upon the person or unless the victim is injured as a result of the crime of driving while intoxicated or vehicular manslaughter.

ELIGIBLE PROGRAMS

- *Victims of Sexual Assault Programs*
- *Victims of Spouse Abuse Programs*
- *Victims of Child Abuse Programs*
- *Prosecutor-based Victim Service Programs*
- *Criminal Justice Victim Service Programs*
- *Other Victim Assistance Programs*

ELIGIBLE SERVICES

Eligible services include, but are not limited to, the following:

Crisis Intervention - services that meet the urgent emotional or physical needs of crime victims, i.e., 24-hour hotline to provide counseling and referral services, etc.

Emergency Services - may include temporary shelter for safe environment; petty cash for transportation, food, shelter, first aid, medical assistance, and other necessities.

Support Services - may include follow-up counseling (for other than crisis reactions); guidance in resolving practical problems created by the victimization; assistance in obtaining the swift return of property, referral to other sources of assistance, etc.

Prosecution Based Services - may include assistance in the criminal justice proceedings including orientation to the criminal justice system, scheduling and hearing notifications, case status information, preparation for testimony, victim impact statement, notice of outcome, restitution plan, transportation to and from court, child care services, escort (advocacy) services, etc.

Training Programs - limited to training programs that improve the service skills of persons (salaried and volunteer) who provide direct services to crime victims.

Printing & Distribution/Public Notification - includes brochures and similar announcements describing the direct services available and how to obtain a program's assistance, and similar public notification efforts intended to recruit volunteers.

INELIGIBLE COST ITEMS

State funds and local match funds cannot be utilized for the following cost items:

- *Construction or renovation costs;*
- *Cost of real estate property;*
- *Large items of equipment, i.e., vehicles, security systems, etc.;*
- *Salary of administrative personnel.*

NOTIFICATION FILING

PROCEDURES State Services to Victims Fund Program Announcements are mailed out and Application Packets are available from the Department of Public Safety in **March** each year. The **deadline for submission is in April**.

CONTRACT PERIOD

The Contract Period for approved projects is **July 1st through June 30th**.

CONTACT PERSON

Vicky Scott, Program Specialist
Department of Public Safety
P.O. Box 749
Jefferson City, MO 65102-0749
(573) 751-4905



DOMESTIC VIOLENCE SHELTER TAX CREDIT PROGRAM

Program Information

Approved by the General Assembly in 1997, \$2 million in tax credits beginning in the taxable year 1998 are available to Missouri taxpayers who donate at least \$100 to a qualified shelter or shelters during the taxable year. A taxpayer shall be allowed to claim a tax credit against his or her state tax liability in an amount equal to fifty percent of the amount such taxpayer contributed to a qualified shelter for victims of domestic violence. Only those shelters who have applied and received notice of qualifying status are eligible to accept donations under this program. A list of participating shelters will be made available to taxpayers upon request to this office.

The tax credit is intended to be an incentive for Missourians to support the efforts of domestic violence shelters in the state. With increased donations, shelters may be able to increase services, staff, and bedspace; turning away less victims, and ultimately, turn the curve from repeat domestic violence incidents with the same victims and offenders.

Taxpayers will contact the shelter or shelters to which they wish to contribute, and the shelters will have on hand the form necessary for the taxpayer to complete and submit to the Department of Public Safety.

Once the tax credit is authorized, the taxpayer will receive confirmation in the form of an eligibility certificate, which the taxpayer then attaches to his or her Missouri

state (MO-1040 Long Form and MO-TC – Miscellaneous Income and Tax Credits) tax return. The tax credits began with the January 1, 1998 taxable year.

Eligible Contributions

Please note that eligible contributions include: cash, land, buildings, or vehicles. The donor must obtain two independent appraisals establishing the fair market value of donations of land, building, and/or vehicles. These appraisals must be submitted with the donor's application for tax credits, and the donation shall be valued at the lesser of the two appraisals. In addition, a Phase I Environmental Assessment must be performed prior to the donation of all land and buildings (excluding existing residential properties); and a written determination from the National Flood Insurance Program must also be obtained, addressing the potential risk of damage due to flooding, including the probability that flooding may occur annually, as well as a long-range projection.

Ineligible Contributions

In-kind donations including, but not limited to, clothing, furniture, services, leases, marketable securities (stocks) and the like are not eligible for a tax credit under this program. However, such prospective donors can sell most of those items to generate cash, which can then be donated to the shelter as a qualified donation.

Eligible Contributors

The statute defines a "taxpayer" as a **person**, **firm**, a **partner** in a firm, corporation or a shareholder in an **S corporation** doing business in the state of Missouri and subject to the state income tax imposed by the provisions of chapter 143, RSMo, or a **corporation** subject to the annual corporation franchise tax imposed by the provisions of chapter 147, RSMo, or an **insurance company** paying an annual tax on its gross premium receipts in this state, or other **financial institution** paying taxes to the state of Missouri or any **political subdivision** of this state pursuant to the provisions of chapter 148, RSMo, or an **express company** which pays an annual tax on its gross receipts in this state pursuant to chapter 153, RSMo, or an **individual** subject to the state income tax imposed by the provisions of chapter 143, RSMo.

Shelters' Use of Contributions

Use of donated land, buildings, property or cash through the tax credit program is not restricted, except to the end that shelters must expend such contributions in a manner that is consistent with and supports the overall non-profit purpose of the shelter.

State Fiscal Year

Shelters are currently qualified through June 30, 2000.

Sample Calculation

John Doe donates \$200 to ABC Qualified Shelter on August 1, 1999. He completes the necessary application provided to him by the shelter, and attaches a copy of his check or cash receipt. When the check clears, the shelter forwards the application to DPS. Based on the information provided, Mr. Doe

is eligible for a 50% credit, or \$100 off his 1999 income tax return. DPS sends an eligibility certificate to Mr. Doe, who places it with his other tax records. Next April, Mr. Doe figures his state income tax liability on long form MO-1040, and owes the Dept. of Revenue an additional \$125.00. Mr. Doe attaches his \$100 eligibility certificate and Form MO-TC, and writes a check to the Dept. of Revenue for \$25.00. Should Mr. Doe not be able to claim the credit in the year of donation, he may carry the credit forward 4 successive years until used entirely.

Qualifying Conditions

Shelters must meet the requirements of RSMo 455.220 in order to qualify for this program. Please see the Special Conditions page of this Application Packet for specific information on requirements.

Your interest in this program is appreciated. For further information, contact:

Kristi Hixson

**Dept. of Public Safety, Office of the Director
Domestic Violence Shelter Tax Credit Program
P.O. Box 749**

Jefferson City, MO 65102

(573) 751-4905 or toll-free 1 (888) FYI-MDPS

fax (573) 751-5399 e-mail

kristi@dps.state.mo.us



*"Never doubt that a small group of concerned citizens
can change the world.
Indeed, it is the only thing that ever has."*

Margaret Mead

Domestic Violence Shelter Renovation/Construction Grant Program

The Missouri Department of Public Safety continued to work with the Domestic Violence Shelter Renovation/Construction Grant Program initially appropriated in 1997 for the purpose of increasing the bed-space available for the shelter of domestic violence victims and their children. All programs funded provided a minimum of 50% of the total project costs in local matching funds. It is anticipated that all projects will be completed by December 1999.

The impact of domestic violence on the victims and their families is debilitating and diverse. Physical injury, emotional trauma, financial hardship and intergenerational violence all occur as a result of violence in the home. Additionally, according to the 1986 Virginia Child Protection Newsletter, the children living in homes where domestic violence occurs are 15 times more likely than the general population to be physically abused and neglected. The impact of domestic violence, even if the children are not directly abused, can be extremely traumatic and detrimental to the child's development. Studies indicate that there is a link between the violent behavior of adults and their experiences with domestic violence, either directly or indirectly, as children.

A total of 14 domestic violence programs received funding to increase the number of beds available for victims of domestic violence and their children. The number of beds available through these 14 programs increased from 218 to 475. Two new programs were established with this funding, one in the Lincoln County area and the other in Lexington. The other 12 programs either built new, larger facilities or expanded their existing facilities.

This funding is making it possible for victims of domestic violence and their children to find a safe place to stay - a place that is staffed by trained individuals who provide support services as these women strive to make changes in their lives and to provide an environment free of violence for their children.

During this past year, DPS staff visited a number of the new facilities and attended the Ribbon Cutting Ceremony at Synergy Services, Inc. in Kansas City. The addition at Synergy Services, Inc. added four beds in the domestic violence shelter and 12 beds in the children's wing. In addition, office space was moved on-site which freed up space in another facility for two transitional housing units. Synergy Services, Inc. has taken a unique approach to addressing domestic violence. This agency is working directly with women victimized by domestic violence and their children, but also working with child victims of abuse whose cases have been identified by the Division of Family Services to be domestic in nature. The community is fully supportive of the collaborative efforts of Synergy, the Salvation Army, the Division of Family Services in Ray, Clay, and Platte Counties, and the Ray, Clay, and Platte County Juvenile Justice Departments to develop and implement this project.





DEPARTMENT OF CORRECTIONS

Dora B. Schriro, Ed.D., Director

2729 Plaza Drive
P.O. Box 236
Jefferson City, Missouri 65102
573 - 751-2389 TDD Available
573 - 751-4099 (Fax)

September 21, 1999

The Honorable Vicky Riback Wilson
Co-Chair, Domestic Violence Interim Committee
State Capitol, Room 110A
Jefferson City, MO 65101

The Honorable Bill Luetkenhaus
Co-Chair, Domestic Violence Interim Committee
State Capitol, Room 233A
Jefferson City, MO 65101

Dear Representative Riback Wilson and Representative Luetkenhaus:

To follow is a summary of the testimony presented to the Domestic Violence Interim Committee on September 13, 1999 as well as copies of recent articles and publications for the committee's consideration.

1. Number of arrests, CY98.
 - Domestic violence is defined as attempting to cause or causing bodily injury to a family or household member, or placing a family or household member by threat of force in fear of imminent physical harm (455.200 RSMO).
 - Family/Domestic violence includes Child Abuse, Assault of a Family Member, Stalking, Child Endangerment, Child Molestation, Use of Child in Sex Performance, Non support, Violation of Protection Order, etc.
 - There was a total of 43,318 family/domestic violence arrests reported by local law enforcement to the Missouri State Highway Patrol in CY98.
2. Number of commitments to prison and probation case openings for family/domestic violence offenses.
 - During CY98 341 felons were committed to prison and 2,157 offenders were placed on probation reference above offenses.
 - Today, a total of 360 felons is confined and 3,636 more are on probation or parole supervision for the above offenses.

★ ★ AN EQUAL OPPORTUNITY EMPLOYER ★ ★

Services provided on a Non-discriminatory basis

AD EXCELLEUM CONAMUR ★ WE STRIVE TOWARDS EXCELLENCE

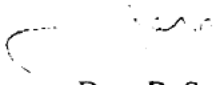
-72-

3. Self reported prior abuse and neglect by offenders, national data.
 - *Bureau of Justice Statistics, Prior Abuse Reported by Inmates and Probationers*, April 1999, provides self reported physical and sexual abuse data, by age (prior to age 18 and at any age) by confinement status (Bureau of Prisons, state Departments of Corrections, jails), gender and home status (family/foster care).
4. Department of Corrections sponsored activities.
 - There is a total of 85 domestic violence/anger management programs in the Department's 18 correctional centers. In the past six months over 3,500 offenders were involved in these various programs.
 - A total of 116 programs is provided in the Division of Probation and Parole's five regions. A total of 4,077 offenders was served in the past 12 months.
5. Recommendation.

Although RSMO 455.200 defines domestic violence, statute does not specify which offenses are to be reported by local law enforcement to the Missouri State Highway Patrol as domestic violence crimes. Nor does the statute define which offenders charged under what specific circumstances are to be included in that count (kindly refer to the September 13, 1999 memo from Ken Hartke, attached). Accordingly, it is difficult to establish the extent to which domestic violence is occurring and to determine which interventions actually reduce its occurrence. The committee may wish to consider some clarification of the statute so as to specify which offenses under what circumstances should be reported.

I was very pleased to be invited to testify and I remain available at your convenience.

Sincerely,


Dora B. Schriro, Ed.D.
Director

DBS:emr

Enc.

cc: Representative Dorathea Davis
Representative Patrick Dougherty
Representative Barbara Fraser
Representative Mary Kasten
Representative Emmy McClelland
Representative Cindy Ostmann
Representative Carson Ross

MARKET CONDUCT MEMORANDUM

TO: Marsha Mills, Director, Resource Administration
FROM: Cynthia M Amann, Paralegal *CA*
DATE: August 31, 1999
RE: Domestic Violence Issues

During 1994 and 1995 the issue of domestic violence was intensely debated at the quarterly national meetings of the National Association of Insurance Commissioners {NAIC}. At issue was whether or not a life insurer or health insurer could limit or exclude benefits when an injury or death results from domestic abuse; whether or not a property and casualty insurer could deny coverage for a loss if a co-insured caused the damage; or whether or not an insurer could refuse to renew coverage or restrict coverage, or surcharge or apply a rating factor, because an applicant is or was a victim of domestic violence. Also discussed was the prohibition of asking a prospective insured any questions on an application related to domestic violence.

The general argument was that a company wants to avoid the types of risks that they suspect will result in losses, thus driving up the company's costs. If one is engaged in a high risk activity then most insurers want the opportunity to either rate one accordingly or even deny the coverage. Unfortunately, some industry people likened a victim of abuse to that of "the smoker that just won't quit." Further, it was widely maintained, and not just by the insurance industry, that by staying with the abuser the victim was somehow at fault. Thus, the analogy of engaging in a high risk activity. Life insurers were concerned because the existence of a policy could serve as an incentive for the abuser to murder the victim. Health insurers were concerned because of the repetitive trips to the Emergency Room and/or Doctor's office for treatment. And many PAC carriers became concerned over what is now referred to as the 'innocent co-insured.' If a spouse burns the house down out of spite, anger, or some need to control the victim, since the victim is also an insured, and almost all policies do not provide coverage for an intentional act, the 'innocent co-insured' is now punished yet again -- once for being the victim of the spouse's actions and secondly, by having coverage denied for the fire.

Proponents for legislating some sort of action maintained that an injury is an injury, regardless of how it is caused. If the policy provides coverage for the peril then the policyholder has a contractual right to the benefit. A great deal of concern was expressed by these proponents that the companies were treating victims of abuse in a discriminatory manner. They pointed out that their situation is not always avoidable, and that abuse should be viewed as a crime and not a disease or an accident, and as a matter of public policy the insurance industry should not discriminate against victims of a crime.

Companies further maintained that if they cannot rely upon one's medical/physical condition when underwriting, as is done with every other applicant, in effect, you are making a new class of individuals. Most companies supported a nondiscriminatory bill but not one that would create

preferential treatment. To do so would require that the company provide coverage for a risk that they would normally find uninsurable.

Others maintained that a victim of abuse should not be singled out with rate increases, other restrictions, declinations and/or cancellations, solely because of their victim status. They have been victimized once by the abuse; they should not be victimized a second time when they disclose the abuse only to have their insurance coverage dropped. If encouraging a woman to speak out and leave the abuser, one can't very well wonder why she won't if the health coverage or home owner's coverage for herself and her children will be affected.

As a result of these debates four model laws were drafted which prohibit the sole use of one's status as a victim of domestic violence as an underwriting criterion.

Unfair Discrimination Against Subjects of Abuse in Health Benefit Plan Act {1996}; Unfair Discrimination Against Subjects of Abuse in Life Insurance Model Act {1997}; Unfair Discrimination Against Subjects of Abuse in Disability Income Insurance Model Act {1997}; Unfair Discrimination Against Subjects of Abuse in Property and Casualty Insurance Model Act {1998}.

The key components of these model acts are as follows:

- ▶ an insurer is prohibited from using an applicant or insured's abuse status as an underwriting criteria. An insurer is prohibited from refusing to issue, renew, reissue, cancel, terminate, restrict, exclude coverage, or add a premium differential to a PAC policy on the basis of abuse status.
- ▶ an insurer is prohibited from denying or limiting payment for a loss incurred as a result of abuse by someone other than a co-insured. Recognizing that many losses are the result of the abusive actions of a co-insured, the model attempts to address this with an innocent co-insured provision. In the model, if a loss occurs because of the intentional, abusive act of an insured, the insurer is now required to pay the innocent first-party claimant an amount equal to the claimant's legal interest in the covered property.
- ▶ an insurer cannot rely upon other exclusions or limitations on coverage that the department has determined unreasonably restricts the victim of abuse from being indemnified for such losses.

**Department of Health
Domestic Violence Overview
September 13, 1999**

The Missouri Department of Health has a number of activities and programs that impact the issue of domestic violence. These are focused in the areas of education and awareness, programs or services, and data. The Department's initiatives encompass a broad view of domestic violence that includes partner violence as well as other aspects of family violence such as child abuse and neglect.

Education/Awareness

In August 1998, the Department co-sponsored the "Violence Against Women: A Community Challenge" conference. Other sponsors included the U.S. Department of Health and Human Services, the Sinclair School of Nursing, and the Law Enforcement Training Institute at the University of Missouri-Columbia.

Staff from the Department are serving on the planning committee for the first Regional Conference on Domestic Violence, "Developing a Model Community Response". This conference is being presented September 28-29, 1999 in Kansas City by the Region VII Department of Health and Human Services Office of Women's Health, the Department of Labor Women's Bureau, and the Department of Justice Community Relations Service.

Schools are supported in providing education related to violence, sexual assault, and suicide prevention, identification of child abuse and neglect, and tracking of substantiated cases of abuse and neglect through the School Age Children's Health Services Program.

Education and training regarding domestic violence and abuse is provided to agencies and staff who provide home visiting services through contracts with the Department. There are currently 7 home visiting programs throughout the state with two more sites being initiated in FY 2000.

Educational materials distributed through the Well Child outreach program emphasize safety in the home which may include violence prevention.

Screening and referral for domestic violence are included as contractual obligations for providers of comprehensive family planning services.

Programs supported by the department provide preventative sexual assault education to:

- communities,
- children and adults, and
- training for professionals and volunteers who work with victims.

During this fiscal year, another area of education and training is being focused on health care providers. A recent study referenced in the journal Community Health Center Management, noted that 92% of women who were physically abused by their partners, did not discuss these incidents with their physicians. Health care providers are often the first and only professionals to see a battered woman's injuries. This places them in a unique position to identify abuse and to intervene. To do so, however, they must acknowledge domestic violence as a health care issue and be trained to effectively intervene. During this fiscal year, we plan to identify or develop protocols that will assist health care providers to identify and intervene with individuals or families with a history of or who may be at high risk for domestic violence, and child abuse or neglect.

We will also be collaborating with other state and community agencies to target new training efforts to agencies and providers to improve the identification of domestic violence and appropriate interventions.

Programs/Services

Tel-Link, the department's toll free referral and information line, provides information and referrals to appropriate services to callers who request assistance related to domestic violence.

The department collaborates with other public and community agencies to increase awareness and access to domestic violence resources for women and families who are receiving service coordination as a result of perinatal substance abuse.

Sexual assault prevention programs funded by the department provide:

- medical examinations for sexual assault victims, and
- sexual assault hotlines.

Sexual Assault Victim Services Program provides funding for counseling with licensed therapists and as well as support groups.

The SAFE-CARE network which is composed of trained physicians and nurse practitioners provides medical examinations for children who may be victims of sexual or child abuse.

Domestic abuse services are included in the Alternative to Abortion program which serves pregnant women.

A subcommittee on domestic violence is being formed as part of the Department's Injury Control Advisory Committee. The subcommittee will serve in an advisory capacity to make recommendations regarding the department's activities related to domestic violence.

Data

The Department is currently working with the University of Missouri-Columbia on the development of a sexual assault surveillance system.

The Department is evaluating what information is available in existing data bases. Some information on individuals hospitalized for spouse or child abuse can be gleaned from the hospital discharge files. This data is limited by the fact that only individuals who were hospitalized would be included and it would not capture those who may have been injured but did not seek treatment. The Department will collaborate with other state agencies to determine additional data sources that can provide information to assist in determining the scope of domestic violence in Missouri.

The Department looks forward to increasing its collaborative efforts with other state and community agencies to address domestic violence issues.

Tricia Schlechte
Deputy Director
Division of Maternal, Child and Family Health
Department of Health

**Testimony by DMH, Dr. Roy Dr. Wilson
to House Interim Committee on Domestic Violence
Rep. Vicky Riback Wilson and Rep. Bill Luetkenhaus, co-chairpersons
Monday, Sept. 13, 1999, 3:20 p.m.**

Madam chairman, mister chairman and other members of the Committee. Good afternoon. Thank you for this opportunity to testify on this very important issue.

My name is Roy Wilson, Director of the Department of Mental Health. As a psychiatrist who has worked in both rural and urban treatment settings here in Missouri, I can say domestic violence does have an impact on the people we serve in the Department of Mental Health.

The National Association of State Mental Health Program Directors has looked at the issue of understanding and treating the psychological effects of physical and sexual abuse. We know that much remains to be learned about the specific role that trauma plays in the development of subsequent mental health and substance abuse disorders. Much of the available information is anecdotal, or is based on studies with small or limited samples. However, participants at a NASMHPD's national meeting on this issue agreed that:

- The psychological effects of violence and physical and sexual abuse in our society are pervasive, highly disabling, and largely ignored.
- This is an issue that crosses service systems and requires specialized knowledge, staff training, and collaboration among policy makers, providers, and survivors to address successfully.

Issues of domestic violence are disproportionately high for the people who present to us for treatment. It is common for people with substance abuse problems or mental illnesses to have experienced violence of one form or another at some point. This is especially true among women.

According to national studies, at least 50 percent of the women who receive psychiatric inpatient treatment have experienced physical or sexual abuse. The same is true for as many as 70 percent of the women with alcohol or other drug abuse problems.

The following information will help outline the impact domestic violence, including sexual abuse, has on people served by the Department. Much of this information is from national data. Some of the Department programs screen for domestic violence for

purposes of treatment intervention. This information is not compiled for statistical purposes and therefore our own internal statistics are very limited. In addition, our screening is geared toward identifying victims of violence and not the offenders. I believe that as a Department we must do a better job of gathering data and identifying the victims as well as the offenders.

If we do not have adequate screening and assessment for our consumers who are offenders and victims, then they are most likely to be repeat users of our services and thus increase mental health costs in Missouri. Failure to address domestic violence interferes with treatment effectiveness and contributes to relapse.

(CPS)

- Numerous studies have shown the high rates of victimization among those with a variety of psychiatric illnesses, particularly depression, some anxiety disorder, eating disorder, substance abuse, and certain personality disorders. While many biological and psychosocial factors lead to the development of any such illness, victimization is a strong contributory factor. For example, studies of battered women reveal high rates of depressive and post-traumatic stress disorder symptoms, as well as alcohol and other substance abuse disorders.

- Individuals who are the victims or witnesses of domestic violence will in many cases suffer from Post-Traumatic Stress Disorder (PTSD). The Division of Comprehensive Psychiatric Services (CPS) currently serves approximately 1,950 individuals with a diagnosis of PTSD. The number of PTSD cases secondary to domestic violence is unknown.
- Some of the clients seen in DMH hospital emergency rooms are victims of domestic violence and some individuals civilly committed to hospitals as dangerous to others have committed acts of domestic violence.
- We also learned from the flood of 93 that there was a great need for domestic violence services for the survivors of the flood. Missouri was the first state to receive federal aid for these services. More than 2,000 women and children were served through the grant, which linked mental health service providers with domestic violence shelters. One of the issues I already mentioned is the lack of attention to perpetrators of domestic violence. This grant is an example of that, as it appears the services were primarily directed to the victims.

SUBSTANCE ABUSE:

- Research into domestic violence indicates that high rates of violence toward children occur in poor families with young children where the caregivers use drugs. Also, studies report that children who are exposed to interparental violence are at greater risk for being physically abused.
- According to research, alcohol is present in more than 50 percent of all incidents of domestic violence.
- Some of our women's CSTAR programs began as domestic violence shelters and evolved into alcohol and drug abuse treatment programs because of the strong association between domestic violence and substance abuse.
- Studies show a range as high as 59 percent of men who commit acts of domestic violence also have a substance abuse problem.
- Research indicates that women who abuse alcohol and other drugs are more likely to become victims of domestic violence. One study reports 66 percent of victims abuse alcohol or other drugs.

- Studies show a range of 30 percent to 84 percent in the number of child abuse and neglect cases where drug or alcohol abuse is present.
- Teachers have reported a need for protective services 3 times more often for children who are being raised by someone with an alcohol or drug abuse problem.

MRDD

Domestic violence can also be an issue for individuals with developmental disabilities and their families.

- According to Safety First, a collaborative effort to combat sexual abuse and domestic violence, the lifetime rate of sexual abuse and domestic violence among women with developmental disabilities is high, with as many as 80 to 90 percent experiencing such abuse.
- The Department currently is involved in a study to determine how to provide more effective support to women with disabilities in preventing abuse and violence in their lives. The

study is surveying families with children with disabilities throughout the Kansas City area. Preliminary responses indicate that 25 percent of the families report "violence in general" including violence in relationships is a "definite problem".

This summary of both national and Department data demonstrates the severe impact of domestic violence on the clients that we serve. I believe we are moving in a direction that will help us do a much better job. However, our current efforts at assessment and tracking are not near enough to address the issues of identification, treatment, and recovery.

Some of our efforts currently around domestic violence issues with our clients include:

- The Comprehensive Substance Treatment and Rehabilitation (CSTAR) programs are designed to address the needs of women and their children, including domestic violence. Staff in these programs are trained to address the impact of domestic violence. Some of the agencies that have CSTAR programs also operate domestic violence shelters. Others have close relationships with domestic violence shelters in their area.

- The Division of Alcohol and Drug Abuse and the Lafayette House in Joplin are using a federal grant to provide services for women who suffer from substance abuse and mental illness, and who have been victims of violence. The grant also serves the children of these women, and it may be renewed for three more years.
- The screening and assessment process for substance abuse programs typically identifies domestic violence issues for purposes of clinical intervention. However, the data is not compiled for statistical purposes.
- Likewise, DMH hospital staff assess all clients for histories of domestic violence or abuse to provide appropriate treatment and follow-up for clients who have been victims or witnesses to domestic violence.
- Community mental health workers provide in home assessments of potential domestic violence situations and in some cases request the offender be civilly committed to a hospital for evaluation.

- The Division of CPS has programs to treat clients who are committed to the Department long-term care hospitals for acts of domestic violence. These programs help people to change their errors of thinking and their behaviors that cause them to justify their violent actions.

As you can tell from my testimony, domestic violence clearly has an impact on the people we serve, and the Department is doing some things to deal with the impact. However, as I stated earlier, we need to do more to adequately address the needs of our clients, and work with other agencies when we can to better serve the needs of all citizens.

- The direction of the Department of Mental Health is to bring the divisions of Alcohol and Drug Abuse and Comprehensive Psychiatric Services closer together into a single coordinated system. This will allow us to use a common screening process and coordinated care management to do a better job of assessing when domestic violence plays a role and better coordinate treatment services to deal with domestic violence issues.

- We must develop better screening mechanisms for identifying victims and also batterers.
- We are developing a standard screening instrument for all our clients and we must ensure that domestic violence information is gathered and tracked for our clients, both victims and offenders of domestic violence. This will help us to better diagnose our clients mental health and substance abuse service needs.
- We need to fund training of our staff, especially front-line staff to identify and treat victims and offenders of domestic violence. Treatment staff must be sensitive to this relationship. Threats of spousal violence should be a signal that both women and children may need protection.
- We must promote collaboration among the state Departments on this issue, such as use of a standard screening and assessment process. We must build on our state's current and unprecedented foundation of interagency collaboration, including Mental Health and Substance Abuse, Education, Social Services, Health, Corrections, Labor and Economic Development. We must reach out to community-based primary health care, homelessness and domestic violence programs and the criminal

justice systems. This includes linkages with the criminal justice system and correctional system to better address services for perpetrators of violence.

- We need to develop programming to address domestic violence and trauma survivors, including access to safe housing, as well as programming to treat perpetrators of domestic violence.
- In general we must give this issue a higher priority within context of serving Missourians with substance abuse needs, mental illnesses, and developmental disabilities.

Thank you for allowing the Department to address the committee. I will try to answer any questions that you may have.

Interim House Committee on Domestic Violence

September 13, 1999, 3:30 pm

Testimony of Karla M. McLucas

Director, Department of Labor & Industrial Relations

Thank you committee members, for allowing me to offer brief testimony today.

Before I explain what the department procedures are, I want to tell you why these procedures are important. (Relay experiences)

Here are some facts that I want to share with you that emphasize the importance of the issues you and your committee has raised.

In 1996 “assaults and other violent acts by persons” accounted for 14.9% of the workplace fatalities in the United States.

(Second only to “highway accidents” at 21.7%). However, violence in the workplace is the number ONE cause of fatalities among female workers in the U.S. (USDOL & DOJ studies)

Internally, all Department of Labor managers are trained to refer any employee who states that they are a victim of domestic violence, to the state-sponsored Employee Assistance Program (EAP) for counseling and/or the Human Relations section.

The department has developed and adopted policies in dealing with violence in the workplace. It has come to my attention that we must provide more training to all staff on a continuous basis. Procedures to address potentially violent situations are in place and all employees have been trained in these procedures. For example some of these procedures include:

- 1. Spouses are not allowed in the office unless accompanied by the employee ;**
- 2. If a potential tense or violent situation arises employees use a confidential information alert procedure for the manager on duty to call the police;**
- 3. At the front desk, we have a policy in place to have photos or identification papers of spouses or other persons who have been identified as violent. They are not allowed to visit their spouses in the workplace.**
- 4. Our training includes how employees should handle hostile inquires in the office and how to control and calm a potentially tense situation.**

Additionally, the department has emergency procedures in place for protection of the front desk staff at all of the department's offices across the state (code name and buzzer device).

Also, if an employee is injured in the workplace as a result of a domestic violence incident they can file a workers' compensation claim. This workers' compensation claim must be filed before it is referred to the Department's Crime Victims' Compensation Program. The Crime Victims' Program provides counseling for crime victims. However, this counseling only deals with the victims' need for assistance, not the perpetrator. In instances where employees that have come to the Department of Labor's Crime Victims' Program, we have encourage the abused spouse to seek out local legal and social services types of resources—for example, domestic abuse

referral systems and shelters; local law enforcement agencies, and counseling services from the Crime Victims' Program.

I would like to let you know that the department is developing a legislative proposal to allow the Crime Victims' Compensation Program to enhance its services to victims of crime specifically victims of domestic abuse.

I have some recommended programs and strategies that state agencies could collaborate on to address the issue of domestic abuse in the workplace. They are as follows:

- 1. Offer emergency training for all state workers through the Safety coordinators. The Department's Safety Consultants are available to assist with this training.**

- 2. Ensure criminal background checks for all job applicants.**

One in 33 American adults are either on parole or on early

release from prison. Twenty percent of resumes contain fraudulent information (data from Clarence Kelly & Associates Security Consultants, Kansas City).

- 3. Initiate a public awareness campaign to inform people about the zero tolerance policy concerning violence in the workplace.**
- 4. Continue to update, develop and practice workplace violence response plans formulated by crisis management teams. This would include developing safety procedures for specific issues such as public access and safety risks and exposure from the outside public and the potential internal risks in the internal workplace. Issues such as how to improve safety of employees working in a public access area without sacrificing one on one service and identifying behavior that could escalate into violence should be part of a prevention program.**

5. Develop a brochure giving employees information about domestic violence and how it can escalate to workplace violence.

These are some of the short and long term strategies that state agencies and other partners can utilize to address this issue.

Thank you for this opportunity to testify before your committee. The Department of Labor and Industrial Relations stands ready to assist you in addressing the issue of domestic violence.

Question asked by Representative Fraser concerning identifying domestic violence in the workplace.

As you know, many employees spend a significant amount of their time at work. The workplace can be an area in which people may be more forthright with problems concerning

domestic violence. This issue is sometimes too sensitive to discuss with loved ones and family. However, the relationships that are established with colleagues at work may encourage victims to share their experiences with close colleagues and therefore may be the only place the victim will discuss options to solve their particular dilemma. The workplace can be a major source of information concerning the recognition of domestic violence and a catalyst for encouraging victims to seek help.

